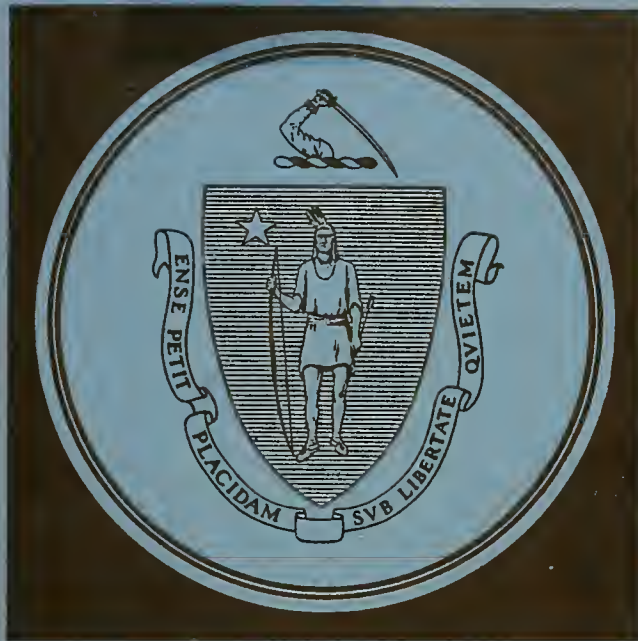


The Commonwealth of Massachusetts



■ FIFTY-SECOND ■

ANNUAL REPORT

of the

MASSACHUSETTS:
Department of Public Health,

■ July 1, 1965 - June 30, 1966 ■

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52nd ANNUAL REPORT

of the

Mass. DEPARTMENT OF PUBLIC HEALTH

July 1, 1965 - June 30, 1966

STATEMENT OF MEMORANDUMS

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MASSACHUSETTS DEPARTMENT OF PUBLIC HEALTH

June 30, 1966

Commissioner of Public Health, Alfred L. Frechette, M.D., M.P.H.

PUBLIC HEALTH COUNCIL

Alfred L. Frechette, M.D., M.P.H., Chairman

Francis B. Carroll, M.D.	1964-1967	John H. Knowles, M.D.	1964-1970
Bernard B. Berger, M.S.	1966-1968	Samuel Kovner	1960-1971
Ralph E. Sirianni	1963-1969	John P. Rattigan, M.D.	1966-1972

Moira E. Nixon, Secretary

BUREAU OF ADMINISTRATION

Division of Administration	Harry W. Attwood, Director
Division of Health Education	Marie F. Gately, M.Ed., M.P.H., Director
Division of Public Health Research, Development, and Professional Training	F. Randolph Philbrook, M.D., M.P.H., Director

BUREAU OF HEALTH SERVICES

Leon Sternfeld, M.D., M.P.H., Bureau Chief

Division of Local Health Services	Leon Sternfeld, M.D., M.P.H., Director and Deputy Commissioner
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District Health Offices

Southeastern District
Lakeville Hospital
Lakeville

William M. Groton, M.D.,
District Health Officer

Northeastern District
Tewksbury Hospital
Tewksbury

Frederick A. Dunham, M.D., M.P.H.,
District Health Officer

Central District
Rutland Hospital
Rutland

Gilbert D. Joly, B.S.,
Acting District Health Officer

Western Region
University of Massachusetts
Amherst

Jerome S. Peterson, M.D.,
Regional Health Officer

and
246 North Street, Pittsfield

Division of Maternal and Child
Health Services

M. Grace Hussey, M.D., M.P.H., Director

Regional Health Director

Benjamin Sachs, M.D., M.P.H.

BUREAU OF HOSPITAL FACILITIES

A. Daniel Rubenstein, M.D., M.P.H., Bureau Chief

Division of Hospital Facilities

A. Daniel Rubenstein, M.D., M.P.H.,
Director and Deputy Commissioner

BUREAU OF CHRONIC DISEASE CONTROL

Division of Adult Health

Myer Herman, M.D., D.P.H., Director

Division of Alcoholism

Edward Blacker, Ph.D.,
Director of Alcoholism Program

Division of Communicable Diseases

Nicholas J. Fiumara, M.D., M.P.H., Director

Division of Dental Health

William D. Wellock, D.M.D., M.P.H., Director

BUREAU OF CONSUMER PRODUCTS PROTECTION

George A. Michael, B.S., Bureau Chief

Division of Food and Drugs

George A. Michael, B.S.,
Director and Deputy Commissioner

BUREAU OF ENVIRONMENTAL SANITATION

Worthen H. Taylor, B.S., Bureau Chief

Division of Sanitary Engineering

Worthen H. Taylor, B.S., Director

BUREAU OF TUBERCULOSIS CONTROL

William P. McHugh, M.D., M.P.H., Bureau Chief

Division of Sanatoria and Tuberculosis
Control

William P. McHugh, M.D., M.P.H., Director

Institutions

Lakeville Hospital

George L. Parker, M.D.

Superintendent

Lemuel Shattuck Hospital

Harry T. Phillips, M.D.

Superintendent

Massachusetts Hospital School

John J. Carroll, M.D.

Superintendent

Pondville Hospital

Claire W. Twinam, M.D.

Superintendent

Rutland Heights Hospital

Endre K. Brunner, M.D.

Superintendent

Tewksbury Hospital

Thomas J. Saunders

Superintendent

Western Massachusetts Hospital

Roland R. Cartier, M.D.

Superintendent

BUREAU OF INSTITUTE OF LABORATORIES
Geoffrey Edsall, M.D., Superintendent

Division of Biologic Laboratories	James A. McComb, D.V.M., Director
Division of Diagnostic Laboratories	Robert A. MacCready, M.D., Director

ANNUAL REPORT OF PUBLIC HEALTH COUNCIL

Alfred L. Frechette, M.D., M.P.H., Chairman

Submitted herewith is the annual report of the Public Health Council for the fiscal year ending June 30, 1966.

Meetings

Regular monthly meetings were held in accordance with General Laws, Chapter 17, Section 3. In compliance with General Laws, Chapter 30A, Section 11A, notices of all regular and special meetings of the Council were filed with the Executive Office for Administration and Finance and with the Secretary of State.

Subcommittees of the Public Health Council met when necessary during the year. The Committee on Hospital Problems, chaired by Dr. Johnson, made two visits to Tewksbury Hospital and one visit to Western Massachusetts Hospital in Westfield. The Committee on Environmental Sanitation, chaired by Professor Fair, met once during the year.

In addition, Dr. Johnson chaired a Survey of Medical Services at Walpole State Prison. The report of this Committee was presented to the Governor in January 1966.

General Duties

The regular duties imposed upon the Council by General Laws, Chapter 111, Section 3, and other statutes have been carried out. These include the approval and licensing of hospitals, blood banks, convalescent and nursing homes, rest homes, public medical institutions, city and town infirmaries, dispensaries and dental clinics, day care centers, and medical schools and laboratories desiring to obtain impounded animals for scientific investigation, experiment or instruction. These approvals are based upon reports of inspections by members of the Department who ascertain if the facilities comply with the Department's standards for licensure.

Other duties included the certification of laboratories which have taken part in the annual evaluation and have demonstrated their ability to perform satisfactorily certain tests; approval of personnel in the Department, including sanatoria; approval of professional personnel at county and municipal sanatoria which contract with the Department for the care of tuberculosis patients; approval of food regulations and air pollution control regulations of local communities; advice to communities and official agencies relative to sanitary problems of water supply, sewage disposal and nuisances.

Contracts between the Medical Milk Commission of Boston and H. P. Hood and Sons, Inc. of Boston, and between the Medical Milk Commission and Vitamilk-Nashoba, Inc. of Harvard, for the production of certified milk were approved.

Agreements were approved and signed between the Commonwealth, through the Department of Public Health, and the following:

Newton Visiting Nurse Association relative to provision of financial assistance for a special public health nursing project concerning follow-up care of prematurely born infants (this was an amendment to agreement approved previously);
Boston University, Department of Psychiatry, relative to a Diagnostic, Evaluation, Referral and Program Development Center for Alcoholics and Unattached Persons in the South End of Boston;
Tufts University School of Dental Medicine relative to Dental Clinic Administration;
Springfield Health Department relative to Springfield Rheumatic Fever Program;
National League for Nursing relative to survey of public health nursing services in Lowell;
GCA Corporation of Bedford relative to preparation of computer programs for reduction of data obtained in the Metropolitan Air Pollution Control District Survey;
Medical Foundation, Inc. of Boston, relative to program of continuing education for practicing dentists in Massachusetts;
Abt Associates, Inc. of Cambridge, relative to provision of programming for the application of computer usage to obtain the annual reports of Vital Statistics;
Boston Department of Health and Hospitals relative to establishing and maintaining a speech, hearing and language center at the Boston City Hospital;
Medical Foundation, Inc. of Boston, relative to provision of funds for completion of a study in the Greater Brockton Area leading to establishment of a Multi-Service Human Assistance Center.

New contracts for the care and treatment of persons with tuberculosis were approved and signed by the Department of Public Health and Boston Sanatorium, Middlesex County Sanatorium, Norfolk County Hospital, and Worcester County Sanatorium.

In accordance with legislation adopted by the General Court in January 1966, the Department, designated by the Governor to administer Title XVIII of the Social Security Amendments of 1965, entered into agreements with the Social Security Administration for purposes of implementing the legislation.

Special Matters

As a further step by the Department in the development of an expanded chronic disease program, the Public Health Council, in March 1966, considered and approved the establishment of a Division of Nursing Homes and Related Facilities. The new Division, formerly a section of the Division of Adult Health, will remain a part of the Bureau of Chronic Disease Control and be under the direction of Dr. Samuel Levey. Also, concerning the Bureau of Chronic Disease Control, in May 1966 the Public Health Council approved the appointment of Dr. Myer Herman as Director of the Division of Adult Health. This position had been vacant for eight months following the resignation of the previous incumbent.

At the close of fiscal year 1965 the Federal government had notified the Department of Public Health that it would be closing its Veterans Administration Hospital at Rutland Heights. The Department informed the

Veterans Administration in Washington and the State Administration of its interest in acquiring this facility in view of the fact that Rutland Hospital was to be replaced in the near future. In August 1965 the Governor signed legislation authorizing the Department to accept for the Commonwealth the hospital at Rutland Heights and on November 1, 1965 the transfer of patients from Rutland Hospital to Rutland Heights Hospital was accomplished. In view of the fact that the Superintendent of Rutland Hospital was due to retire early in 1966 after thirty-eight years of service, the Public Health Council, in September 1965, approved the appointment of Dr. Endre K. Brunner as Superintendent of Rutland Heights Hospital. The operation at Rutland Heights Hospital is expanding and the Public Health Council has met with staff of the Department of Mental Health to consider utilization of part of the Hospital complex by that Department for the training of educable mentally retarded adolescents.

Also, in connection with the operation of the Department's hospital facilities, the Public Health Council approved construction at Western Massachusetts Hospital to provide for expanded chronic and cancer services. Several visits were made to Tewksbury Hospital and consideration has been given to the possibility of affiliation with a medical school in order to utilize the abundance of clinical material available at the Hospital and to supply long-range benefits to the patients.

During fiscal year 1966 a great deal of time was spent by the Public Health Council in conducting public hearings. Although the necessity of these hearings is understood, consideration has been given to streamlining the procedure in order to bring about a more efficient and less time-consuming operation.* It is hoped in this way to allow more time for the Public Health Council to consider and act on other matters of importance to the operation of the Department and on policy questions.

Public Hearings

Twenty-one public hearings were held by the Public Health Council during the year. Fourteen of these hearings concerned nursing or rest home licensure and two hospital licensure. Three hearings were held on appeals of a nursing home, a rest home and a hospital from action by the local authority. The remaining two hearings concerned environmental health -- air pollution and fluoridation of individual water supplies.

Under authority of General Laws, Chapter 111, Section 3, the Director of the Division of Sanitary Engineering conducted hearings relative to landtaking for water supply protection, for sewage disposal purposes,

* Passage of legislation presently before the General Court would provide the Department with a hearings officer and would help to alleviate this problem.

and for operation of refuse disposal areas. Under similar authority the Director of Food and Drugs held hearings relative to adoption of Rules and Regulations governing Transparent and Semi-transparent Wrappers and Coverings, establishment of a Standard of Identity for Baked Beans, amendment of Rules and Regulations Pertaining to Standards of Identity for Uncarbonated Fruit Beverages, Ingredients and Imitations Thereof and Standards for Orange Juice Drink and Reconstituted Orange Juice Drink, and adoption of Rules and Regulations relative to Fish and Fish Products. The Director of Hospital Facilities held a hearing relative to amendment of the Rules and Regulations for the Licensing of Dispensaries and Clinics; and the Director of Adult Health held a hearing relative to revisions to the Rules and Regulations for the Licensing of Convalescent or Nursing Homes. Hearings pertaining to the licensing of medical care facilities were held by the Divisions of Hospital Facilities and Adult Health (and Nursing Homes and Related Facilities following its establishment in March 1966).

The information presented at hearings held by Division Directors was submitted to subsequent meetings of the Council for action.

Regulations

Following public hearings held in accordance with the State Administrative Procedure Act, new regulations were adopted and existing regulations amended as follows:

Rules and Regulations for the Licensing of Convalescent or Nursing Homes	Revised
---	---------

Rules and Regulations Governing Transparent and Semi-transparent Wrappers and Coverings

Standard of Identity for Baked Beans, etc.

Rules and Regulations for the Licensing of Dispensaries and Clinics	Amended
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Rules and Regulations Pertaining to Standards of Identity for Uncarbonated Fruit Beverages, Ingredients and Imitations Thereof and Standards for Orange Juice Drink and Reconstituted Orange Juice Drink	Amended
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Rules and Regulations Relative to Fish and Fish Products

Hospital Survey and Construction

Approval was given to applications from the following medical care facilities for financial assistance from Federal funds allotted to the Commonwealth under the Hospital and Medical Facilities Survey and Construction Act. In some instances these represent additional grants given because of increased cost of construction as evidenced by bids received or because it was found on further investigation that the facility was eligible for additional funds as a percentage of its construction costs:

*Massachusetts General Hospital, Boston	\$ 55,600.
Jewish Memorial Hospital, Roxbury	279,680.
Morton Hospital, Taunton	15,733.

* Increased to \$66,948.80.

The grant to Massachusetts General Hospital represents a substitute project submitted for an Acute Psychiatric and Alcoholic Rehabilitation Service. The difference between the amount noted above and the amount allocated for the original project in December 1964 was refunded by the Massachusetts General Hospital and re-allocated.

Personnel

On June 14, 1966 two appointments were made to the Public Health Council. Dr. John P. Rattigan, General Director of St. Elizabeth's Hospital, Brighton, was appointed to fill the expired term of Dr. Johnson. Professor Bernard B. Berger of the University of Massachusetts, Water Resources Research Center, was appointed to fill the unexpired term of Professor Gordon M. Fair, who had resigned effective March 1, 1966. Therefore, the membership of the Public Health Council on June 30, 1966 was as follows:

Alfred L. Frechette, M.D., M.P.H., Chairman	
Francis B. Carroll, M.D., M.P.H.	1964-1967
Bernard B. Berger, B.S., M.S.	1966-1968
Ralph E. Sirianni	1963-1969
John H. Knowles, M.D.	1964-1970
Samuel Kovner	1965-1971
John P. Rattigan, M.D.	1966-1972

Acceptance of Report

At a meeting of the Department on November 8, 1966, the Commissioner presented to the Council a report of the Department of Public Health for fiscal year 1966, and it was voted that the report, together with the foregoing brief summary of the activities of the Public Health Council, be approved and adopted as the report of the Department of Public Health for the fiscal year 1966.

FIFTY-SECOND ANNUAL REPORT OF THE COMMISSIONER OF PUBLIC HEALTH

To the Public Health Council:

Gentlemen:

I have the honor to submit the fifty-second annual report of the Department of Public Health for the fiscal year ending June 30, 1966.

BUREAU OF ADMINISTRATION

The Commissioner, in addition to being the executive and administrative head of the Department, maintains continuing liaison with the Executive Department, the Legislature, the voluntary health agencies and local community health agencies. Regular monthly conferences were held with the Division Directors in order to keep fully informed of the various activities being carried on throughout the Department and to assist in formulating Department policies and programs. In the establishment of policy and in making formal and legal decisions of the Department, the Commissioner and the Public Health Council acted jointly.

The second closed-circuit television system in the Department's hospitals was dedicated on November 17, 1965 at Lakeville Hospital. The first system was officially opened at the Massachusetts Hospital School in April 1965. Former Governor Foster Furcolo, under whose administration legislation was enacted for construction of the new Lakeville Hospital, was the main speaker at the dedication ceremony. The Lakeville system consists of two closed-circuit channels but is designed to receive five additional channels emanating from outside educational and commercial sources.

On March 1, 1966, President Johnson signed H. J. Resolution 403 to permit the Department of State to invite the World Health Organization to hold its twenty-second World Health Assembly in Boston in 1969. The invitation has since been accepted by the World Health Organization and a committee has been set up by the Department to work with local authorities and officials of WHO and the State Department in preparing for the event. The Assembly, which will be held in conjunction with the Department's 100th Anniversary, will bring approximately one thousand delegates from all over the world to Boston and should do much to make the Department's Centennial Celebration a momentous occasion.

The Commissioner's Administrative Assistant gave much time and effort to the above matter. She prepared material for and met on numerous occasions with Congressional delegations. She also worked closely with the Executive and Legislative Departments of the Commonwealth on matters such as: drafting of proposed legislation, Department Coordinator and Expediter for the Governor's Management Survey Team, Department Coordinator to the Governor's Savings Bond Drive Committee, and Department Representative to the Governor's Economy Committee.

Title XVIII. On September 1, 1965 the Governor designated the Department as the single State agency to administer Title XVIII of P.L. 89-97 -- the so-called Medicare law. As the designated agency, the Department has the responsibility for certifying the providers of services to beneficiaries as qualified according to the Federal standards. A contract was signed on December 13, 1965 with the Social Security Administration whereby funds were provided to support the personnel necessary to fulfill this responsibility. The work was integrated into the work of the various divisions so as to minimize duplication of effort. The actual operation of the program is described in the reports of these divisions.

Title XIX. On January 31, 1966, in Executive Order #49, the Governor designated the Department of Public Welfare as the agency to administer Title XIX of the Social Security law, and concurrently gave the Department of Public Health certain responsibilities under this Act. The Department has responsibility for establishing and maintaining standards in institutions used for the care of patients; for setting standards for purchased services, including the content of such services; for establishing requirements for the use of consultant services and the bases of payment for services; and to plan for the development of the facilities and services required to assure the availability and accessibility of high quality medical care for all those entitled thereto. Also, to assist the providers of service in strengthening their resources for preventive, diagnostic, and rehabilitative care or treatment.

Title XIX of P.L. 89-97 provides for an agreement between the Departments of Public Welfare and Public Health, defining the functions of the two departments under this legislation. The Governor's Executive Order laid the basis for such an agreement. As the administering agency the Department of Public Welfare has the responsibility of formulating a Plan for approval by the Federal Welfare Administration of which the agreement is a part. As of the end of this fiscal year the agreement was in process of being drafted and the Plan had not been submitted for approval.

The Assistant to the Commissioner (Radiological Health) has assured for active programs being carried out in the medical, dental, environmental, and milk and food fields of radiological health. These activities are reported in detail in reports by the Divisions of Dental Health, Food and Drugs, Hospital Facilities, and Sanitary Engineering. The Assistant was responsible for coordination of the Radiological Health Services in the Departments of Health of the six New England States in the development of a New England Compact on Radiological Health which was subsequently approved by the New England Governors Conference. Also, as a result of the efforts of the Assistant to the Commissioner (Radiological Health), a contract was entered into with the United States Public Health Service to study the use of Polaroid film in evaluating probable scatter radiation exposures from the use of x-ray and in support of a laboratory for evaluating such exposures.

Boards and Commissions

Under various statutes the Commissioner of Public Health is ex

officio a member of various boards and commissions, including the Health and Welfare Commission, Commission on Aging, Rehabilitation Commission, Milk Regulation Board, Water Resources Commission, New England Interstate Water Pollution Control Commission, Advisory Council on Hospital Surveys and Construction Planning, Approving Authority for Colleges and Medical Schools, Approving Authority for Schools for the Training of Medical Laboratory Technicians, Approving Authority for Schools for Training of X-ray Technicians, Urban and Industrial Renewal Advisory Council, Weather Amendment Board, Pesticide Board, Merrimack River Valley Pollution Abatement Study Commission, Board Regulating Installation of Gas Piping and Gas Appliances in Buildings, Board of Trustees of the University of Massachusetts, Board of Rate Setting for Convalescent or Nursing Homes and Rest Homes, and Special Legislative Commission to Study the Status of Women in Employment.

The Commissioner personally attended as many meetings as possible and designated appropriate staff members to attend others, so that the Department was represented at all meetings of these boards and commissions.

Medical Panels

General Laws, Chapter 32, Section 6, authorizes the Commissioner of Public Health to appoint chairmen of medical panels to review applications from and examine State and municipal employees applying for disability retirement. The chairman of each panel, insofar as is possible, must be a physician skilled in the particular branch of medicine or surgery upon which the application for disability retirement is based. The other two members of the panel are selected by the applicant and the local retirement authority.

New applications for disability retirement during fiscal year 1966 numbered 619. Because of inability of one or more panel members to fulfill their obligation, 90 of these applications had to be processed twice, 15 were processed three times, five were processed four times, two were processed five times, one was processed six times, and one was processed a total of seven times before a medical panel was obtained.

Under General Laws, Chapter 32, Section 89, widows of firefighters, police officers and certain other employees whose work involves considerable risk may apply to an annuity. In such cases the Department designates the third member of a board appointed to determine whether or not the death of said employee was the result of an injury received in the performance of his duty. Annually about fifty such applications are received and processed.

Rating Board

The State Police Retirement Board, under General Laws, Chapter 32, Section 26, interviewed four officers who had applied for retirement because of injury received in line of duty. After examination of the applicants and review of their records, the Board recommended approval of all applications. One of the applications had been considered and tabled in January 1965. After reconsideration it was approved.

Health Statistics

Chapter 508 of the Acts of 1964 transferred the tabulation and analysis of vital statistics from the Secretary of State's office to the Department, in the Section of Health Statistics.

Plans to have data for the 1964 annual vital statistics report (Public Document #1) tabulated at the Division of Adult Health were abandoned because of the increased work load in the machine unit of that Division. This complication, coupled with the fact that 1965 data was fast accumulating, prompted an investigation into the feasibility and practicability of applying computer processing techniques to the annual production of Public Document #1.

A contract for the design, development and demonstration of a computer-based system for preparing reports on the vital statistics has been awarded to Abt Associates, Inc. of Cambridge. Arrangements have also been made to utilize the state-owned GE 415 computer located at the Registry of Motor Vehicles. These significant accomplishments in systems design, programming and conversion, will make the 1964 and 1965 reports available for distribution early in 1967 and will also permit publication of future reports at the close of each calendar year.

Unfortunately, budget requests for fiscal year 1966 for this new operation were denied and thus the functions of this unit are still limited to handling basic data. Funds for additional personnel and equipment have again been requested in the budget for fiscal year 1967, with the hope that this office may play a vital role in providing current, accurate data for health planning and research.

Drug Addiction Rehabilitation Board

The Board was created by statute to establish a program for the treatment and rehabilitation of drug addicts, to coordinate the services and activities of agencies of the Commonwealth and its political subdivisions in the treatment and rehabilitation of drug addicts, and to cooperate with agencies of the Federal Government in developing and coordinating such programs.

The appointment of John D. Coughlan, Director of the Division of Youth Service, to the Board has enlarged the representation of department heads most intimately concerned with the panoramic problem of drug addiction and abuse. It also serves to develop a closer working relationship between the Board and the aforementioned departments. During June the administrative office was moved from 8 Beacon Street to 80 Boylston Street in order to have office space for additional staff. The research section, under Dr. Victor Gelineau, was enlarged as of January 1 by the addition of a supervisor of research and a research assistant. The treatment unit located at Boston State Hospital, directed by Dr. David Myerson, continued development of its services and is currently in the process of expanding in-patient facilities with an enlarged bed capacity. Plans for an out-patient clinic to be conducted by the Department of Health and Hospitals,

City of Boston, were also developed and implemented in the closing weeks of June. This unit will be conducted by the Board of Health and Hospitals under a reimbursement agreement with the Board. It will be administratively responsible to Dr. Leon J. Taubenhau, Deputy Commissioner of Community Health Services, Department of Health and Hospitals, and under the professional direction of Dr. Philip Solomon, Chief Psychiatrist, also the Department of Health and Hospitals.

The Board's educational program has been aimed primarily at the teen-ager and young adult population, attempting to make them aware of the full range of harmful effects, physical and psychological, that the use of narcotics, barbiturates, amphetamines, and hallucinogens can produce.

The Board received requests for copies of its first annual report from all over the nation, particularly from colleges and universities, research bodies, mental health and public health groups, and other colleagues in the treatment and rehabilitation field. Requests for additional educational material from the Board has been received from many high schools around the Commonwealth, civic groups, church groups, and even from industrial nurses working in large plants and companies. Requests to conduct training courses also have been received from organizations who work in the field of drug addiction and abuse.

A survey of the prevalence of drug addiction and abuse in the Commonwealth has produced some preliminary findings which are fully discussed in a special report released in May.

In summary, the results show that the problems of drug addiction and abuse are widespread throughout the State, that no one group, occupational category, or educational level has a monopoly on the problem, and that not enough receive any sort of treatment. It is also evident that many children will be growing up under a considerable disadvantage since they have parents with a problem of drug addiction or abuse.

At the treatment unit at Boston State Hospital, considerable effort has been expended to develop comprehensive and clear recording forms for the collection of data that is both clinically useful and suitable for analysis by standard research techniques. The principal findings to date include demographic information on the patient's background, such as age, sex, race, and psychological data including test results and evaluations of treatment results on different dimensions. The Board has ruled that the treatment unit retain its original purpose, developing new methods of handling the problem of drug addiction, and that, in order to do this, it should not expand the case load above the number it is already treating. However, it is apparent that additional facilities will be needed to attack this problem at all levels.

A proposal to establish treatment units at Bridgewater and Framingham have been discussed with Commissioner John A. Gavin of the Department of Correction. It is the consensus that Bridgewater State Hospital and Womens' Reformatory at Framingham, by virtue of their treatment-oriented hospital affiliation and experience with addicts, are the best available sites for new drug addiction units. It is recommended that the treatment

staff of the proposed units be housed at Bridgewater, but commute to Women's Reformatory at Framingham to provide this institution with services as needed. It is also recognized that the professional staff of the proposed treatment unit could provide consultant services to other institutions within the Correction Department. Requests for personnel to staff this unit were included in the 1967 Supplementary Budget.

An out-patient clinic is to be established at the Public Health Unit, 20 Whittier Street, Roxbury for the provision of services to persons having a problem of drug dependence. The purposes of the clinic are (1) to provide the public with accurate information on narcotic and drug abuse; (2) to determine the role of an out-patient clinic in the field of drug addiction treatment and rehabilitation; (3) to offer the addict an opportunity to secure treatment services voluntarily at an early stage of his illness; (4) to evaluate the role and rehabilitative potential of such a clinic when geographically located in an urban area with a high incidence of drug addiction; and (5) to observe and analyze the inter-functional relationship of the clinic within the integrated treatment and rehabilitative structure of the total Drug Addiction Rehabilitation Board Program.

Massachusetts Committee on Children and Youth

The Committee is charged with furthering the interests of children, youth, and their families. Its program is conducted along three major lines, fact gathering, planning and action.

Reports and recommendations have been completed on the maternal and child health problem and services in Berkshire County and in the City of Somerville. A study of child welfare needs and services in Metropolitan Boston has been completed and recommendations drafted. A study of the nature and extent of the Head Start Program in the summer of 1965 has been completed, and the data forwarded to the national officials of Head Start in the Office of Economic Opportunity in Washington which financed the research. The study of Day Care throughout the State, financed by the State Department of Public Welfare, has been completed. Separate reports on each of seven areas, Fall River, Central Berkshire, Somerville, Worcester, Springfield, Chicopee, and Nashoba Valley, have been published and distributed. A summary report is about to go to press.

At the request of the Springfield Community Council and the Department of Planning, a report was prepared proposing lines of action for the Springfield community to take in developing its social and human resources as work progresses on physical urban renewal. Financed by the U. S. Children's Bureau, a study on the utilization of community services was completed. It involved interviewing 478 families, to find out the kinds of health and welfare problems they and their children may have had and how the families met them. In cooperation with the United Community Services of Metropolitan Boston, the Committee sponsored a study of the whole public welfare system in the Commonwealth, on both State and local levels. This study cost \$165,000, financed principally by foundation grants, and was conducted under contract by the National Study Service, a research organization in New York.

A project has been designed for supplying health services to children in low income families in Somerville in accordance with specifications of the U.S. Children's Bureau for projects in this field. It was financed as part of the Local Area Project. Based on data assembled in 1964-65, a report has been prepared analyzing the social welfare needs of the Central Berkshire area and recommending lines of action by local and State services, both public and private. It is currently being used in the design of the Community Service Center recommended by the study of the public welfare system as an example of how such centers should be set up.

The Committee on Day Care has continued to serve as the setting in which representatives of State departments, colleges, and universities, professional associations, day care agencies and other interests consider jointly the problems in the field and work out common lines of action. Negotiations have begun to arrange for a study of the Division of Youth Services. With the cooperation of the Division and at the formal request of his Excellency, Governor John A. Volpe, the U. S. Children's Bureau has completed a thorough study of the Division and its operations, with the Committee continuing to provide liaison among the interested parties.

A vigorous fight was carried on in Somerville to help the Mayor get an appropriation of \$50,000 to establish a health department with a full-time health commissioner. The budget item was not approved, and other approaches for obtaining approval are being sought.

Following the publication of the Report of the National Study Service in January, a draft of a bill was prepared, designed to implement many of the major recommendations of the study. The bill has been referred for study by the Committees on Public Welfare and State Administration.

The Committee helped to defeat House Bill #3523, filed by Representative Shea of Quincy, which would have negated last year's successful battle for enactment of House Bill #3652 (App. B), which made it possible to demand educational standards for Federally-aided public service positions. Specific recommendations were prepared for amendments to the Mental Health legislation and were presented to the Public Welfare Committee of the General Court.

Massachusetts Health Research Institute, Inc.

The Massachusetts Health Research Institute, incorporated on May 21, 1959, was organized in part to conduct studies, research, and demonstrations in the various fields of public health and medicine in keeping with the purposes and policies of the Department of Public Health and local health agencies engaged in health research within the Commonwealth. During the period July 1, 1965 to June 30, 1966 the Institute accepted 26 grants and seven contracts for a total funding of \$879,886. as compared to 24 grants and six contracts totalling \$503,217. for the period July 1, 1964 to June 30, 1965, and 18 grants and seven contracts totalling \$460,375. for the period July 1, 1963 to June 30, 1964. A

total of 10 grants and two contracts totalling \$343,618. was completed during the period July 1, 1965 to June 30, 1966.

During the past year a new pesticide study was started in which all insecticides used throughout the Commonwealth will be studied. A new contract entitled "Regional Training Program for Improving the Quality and Continuity of Long Term Care in New England" was accepted. Under this contract various training courses are required. During the past year three training courses have been given for participants from all over New England. Attendance at the training courses has been from 25 to 145 participants. During the past year the Federal support for the Encephalitis Field Station was terminated due to curtailment of funds for the supporting agency. The Commonwealth will assume the support for this important activity. A process for the removal of color from ground water has been developed and at the present time attempts are being made to lower treatment costs. This will assist cities such as Gloucester which has a problem at one of its main reservoirs.

Division of Health Education

The Division of Health Education is a service unit providing technical assistance and consultation to the various Departmental units and to other official and voluntary health agencies in the areas of professional health education, public relations and materials production. It deals with all aspects of the educational process ranging from the provision of accurate information to the complexities of motivation for individual concern and action for personal and community health.

The only professional health educator assigned to the central office was on detached service to the Governor's office throughout the year. The Director's activities included planning the health education components of programs with various Divisions, orientation of new employees and students, and participation on planning committees for other health agencies, in addition to administrative functions.

The health educators assigned to the Southeast and Central districts functioned in many program areas, including licensing of Day Care agencies, migrant health, closed-circuit television utilization, smoking programs, vaccination assistance and in-service training for local health workers. Addition of a trained health educator to the staff of the Western regional office permits coverage of an important program component.

The vaccination program provided assistance to communities in the entire central and eastern portions of the State. In addition to emphasis on diphtheria and tetanus immunization, effort was made to encourage immunization against measles. The infant maintenance program included trial of several approaches which will be evaluated as the program progresses.

A full-time health educator was added to the migrant health project since prior experience showed that the majority of program activities were of a health education nature. Programming, production of materials in Spanish and English and staff training have been key functions.

Exploration of possible health education staff functions within certain of the Department hospitals resulted in preliminary discussions for the assignment of a health educator by the Public Health Service. This will permit demonstration of health education techniques for patient, family and staff involvement in the rehabilitation program.

Closed-circuit television facilities were dedicated at the Lakeville Hospital. Since plans call for the eventual availability of such facilities in all Department buildings and the linking of the offices and institutions to a central broadcasting unit, interested staff members of the Division were involved in in-service training to explore ways to make effective use of this valuable educational tool. Three staff members took courses at the Boston University School of Communications.

The 100th anniversary observance in 1969 will be marked by the assembly of the World Health Organization being held in Boston during July. The very considerable effort required to have the invitation issued by the State Department and to expedite review of facilities was a cooperative project of many people within and without the Department. Since WHO has met outside Geneva only six times, and in the United States only once before, in Minneapolis in 1958, the holding of the assembly in Boston will focus national and international attention on the centennial.

Health, both personal and community, is a topic of prime interest to the general public. The broad scope of Department activities and the addition of new programs, such as Medicare, provide a continual source of timely news and material for dissemination through the various mass media. Since public health depends on public response and support, the need for a sound, well-rounded public information program is obvious. During the year the unit initiated 23 radio shows, 50 television programs, and 170 newspaper features and releases. Over 4000 newsclips were tallied from daily papers. In addition, a monthly release was sent to all weekly papers published in the State. This column, under the title "Your State of Health" discusses in depth a topic of timely importance.

The Department's bulletin, This Week in Public Health, was issued 52 times to its mailing list of professional workers. This modest magazine is a very popular publication since, in brief form, it enables the reader to keep abreast of current happenings on the Federal, State and local levels. It is a splendid means of communication and the present list of 2700 readers ranges from Department staff to private physicians and school superintendents.

The library continues to provide valuable service to the staff of the Department. Professional journals are circulated as requested and materials are obtained by inter-library loan when required. Addition of textbooks is limited because of the high costs of professional publications, but every effort is made to obtain the most commonly used standard texts. Through acquisition of publishers' copies and publication of reviews in This Week, a substantial number of books is added annually.

An entirely new system of traffic control for materials production was introduced at the beginning of the fiscal year. It is now possible

to know the exact volume of work performed for each unit. During the year 1173 items were produced requiring 5,428,180 impressions, more than double the production tabulated for the prior fiscal period. Since no additional personnel have been employed, this stepped-up production reflects the greater efficiency achieved by the addition of certain needed items of equipment and by improved work methods.

Another review of work procedures is being started to assess present practices, particularly those involving the job order forms. A training seminar for clerical and other staff involved in processing the orders is being planned. When these two phases are completed, it is anticipated that materials production will present few problems.

The art unit provided service for 263 requests covering design and format for leaflets and posters. Sixteen exhibits were set up and fourteen new exhibits designed and constructed. Two one-day workshops and two two-day workshops were conducted, training public health staff in the use and production of visual aids.

The film library distributed films for 1372 showings having a total attendance of 114,308. Films dealing with maternal and child care, alcoholism, and first aid accounted for 817 of the requests, which came mainly from schools, particularly nursing schools. This library is the only one in the State having a free-loan policy.

Since this Division provides services to other Departmental units, future plans must be somewhat dependent on the needs and demands of the various categorical programs. The past several years have seen an in-depth scrutiny of methods, with subsequent alteration of procedures, resulting in greatly improved service in several areas.

The closed-circuit television facilities which will be incorporated in the new office building will greatly affect the Division and will place heavy demands on many of the technical services offered. Until the system is an actuality, it will be necessary to anticipate its needs in order to train existing personnel to take on the added responsibilities of a new kind of educational communications.

Division of Public Health Research, Development, and Professional Training

The purposes of this Division are to stimulate, initiate, and promote research endeavor within the Department of Public Health and to develop training programs for continuing education of key personnel. This involves consultant assistance to the various divisions in coordinating research activity, appraisal of programming and proposed research, and determination of funding sources for In-Service Training programs, short courses, and accredited schooling. Continuing education of medical, paramedical, and public health disciplines is also a concern. Another purpose is to initiate and coordinate developmental projects of a Departmental nature and also of a state-wide nature in conjunction with representatives of other state agencies such as the Departments of Mental Health, Education, Welfare, and Correction.

The Residency Training Program for physicians in Public Health, including orientation and rotational placement within the Department, was continued and expanded. Plans were developed in cooperation with the Dental Division and the Harvard Dental School to establish a Residency Program for Public Health dentists. Information regarding potential sources of research grant monies and assistance in the development and writing of research grant requests were acquired and disseminated.

Planning, development, and procurement of consultant personnel for closed-circuit television installation, reception, and broadcasting facilities as groundwork for an interconnecting system within the Department of Public Health, and with the Department of Mental Health and the Department of Education was a major concern.

A proposal for a computer complex for the State was developed, along with the planning for training of personnel for the use of electronic data processing.

Supervision and administration of survey aspects of the Vaccination Assistance Project included the development and modification of survey methodology, training of local volunteers, preparation of findings for electronic data processing, compilation and reporting of findings in published form, and interpretation of findings to local health departments and other personnel associated with the project.

A 16-week course was given to nursing personnel and other professionals in this Department on writing skills and techniques.

Cooperation in development of a research design has been accomplished to provide a state-wide engineering survey required to determine appropriate areas for interconnecting a closed-circuit television network within the Commonwealth. A research design has been submitted for the purpose of evaluating the influence of the installation of a closed-circuit educational television system in the Massachusetts Hospital School for Crippled Children.

Present programming will be expanded in training aspects with more intensive emphasis upon development of In-Service Training within the Department. Research grant requests will be developed to evaluate the "teaching effects" of the installation of closed-circuit television at the Massachusetts Hospital School for Crippled Children in Canton. There should be a state-wide survey to determine locations at State institutions for 2500 megacycle transmitters for state-wide HEW closed-circuit television. Personnel should be trained in the field of electronic data processing to meet the manifest needs of the Department. Evaluation and training efforts of the Vaccination Assistance Project should continue, including base-line measurements of selected Massachusetts communities, in anticipation of re-evaluation studies following intensive immunization programming.

Regulations

The following rules and regulations have been promulgated by the Department and are still in effect:

Distribution of biologic products

Adopted 4/9/35; amended 5/14/40; 1/11/49; 12/15/53

Sale of surplus biologic products

Adopted 4/12/49; amended 4/15/53

Use of blood or other tissues for purposes of transfusion

Adopted 1/10/39; amended 4/10/39; 10/7/41; 11/4/41; 9/14/48; 3/11/52; 6/12/56; 7/10/62; 1/12/65

Cancer clinic and service unit values

Adopted 8/12/26; amended 6/14/27; 3/13/28; 1/5/35; 9/14/43; 10/5/43; 11/1/43; 12/14/43; 4/11/44; 1/14/47; 10/18/55

Diseases dangerous to public health

Adopted 1907; amended 12/15/14; 12/14/15; 2/16/17; 4/3/17; 12/18/17; 10/29/18; 11/18/20; 12/8/21; 9/18/28; 6/11/35; 12/10/35; 11/10/36; 2/14/39; 5/1/41; 5/12/42; 4/14/43; 10/5/43; 12/14/43; 1/11/44; 11/3/48

Diseases declared to be dangerous to the public health and reportable

Adopted 1907; amended 12/15/14; 12/14/15; 2/16/17; 4/3/17; 12/18/17; 10/29/18; 11/18/20; 12/8/21; 9/8/28; 6/11/35; 12/10/35; 11/10/36; 2/14/39; 5/1/41; 5/12/42; 4/14/43; 10/5/43; 12/14/43; 1/11/44; 11/3/48

Isolation and quarantine requirements of diseases declared to be dangerous to public health

Adopted 8/9/38; amended 5/13/41; 1/11/44; 11/3/48; 8/12/52; 8/11/64

Conveyance of bodies dead of diseases dangerous to public health

Adopted 7/12/38; amended 8/9/38; 2/14/39

Funerals of persons dead of any disease dangerous to public health

Adopted 8/9/38; amended 5/13/41; 1/11/44

Procurement of impounded animals from animal pounds for purpose of scientific investigation, experiment or instruction, or for the testing of drugs or medicines

Adopted 12/10/57

Treatment of persons exposed to rabies

Adopted 8/10/37; amended 5/13/41

Approval of bacteriological and serological laboratories

Adopted 9/12/39

Manufacture and bottling of carbonated non-alcoholic beverages, soda water, mineral and spring water

Adopted 11/12/35; amended 4/7/36

Uncarbonated fruit beverages

Adopted 5/8/56; amended 3/8/66

Slaughtering and meat inspection

Adopted 7/9/31; amended 12/10/35; 9/14/43

Poultry slaughterhouses

Adopted 9/14/43; amended 8/6/46

Approval of contracts for the production and distribution of certified milk

Adopted 7/14/36; amended 10/14/36

Frozen desserts and ice cream mix

Adopted 9/11/34; amended 5/8/56; 6/9/59; 12/8/59

Bakeries and bakery products

Adopted 2/14/33; amended 1/10/50

Definition of "pasteurized milk"

Adopted 7/8/41; amended 11/4/41; 6/15/50

Establishments for pasteurization of milk

Adopted 2/12/35; amended 6/15/50; 10/20/53; 6/12/56

Addition of vitamins and minerals to milk, nonfat milk, skimmed milk, fortified nonfat milk, and fortified skimmed milk

Adopted 2/13/62

Standards and definitions of purity and quality of food

Adopted 2/9/37; amended 5/8/56; 11/10/64

Dietetic foods

Adopted 5/12/53

Orange juice drink and reconstituted orange juice drink

Adopted 11/10/59; amended 3/8/66

Cacao products

Adopted 8/13/57

Licensing of hospitals and sanatoria

Adopted 4/14/42; amended 2/9/43; 12/14/43; 3/14/50; 1/12/65

Licensing of rest homes

Adopted 11/3/48; amended 12/3/57

Licensing of convalescent and nursing homes

Adopted 11/3/48; amended 12/3/57; 11/8/60; 6/9/64; 8/10/65

Dispensary license

Adopted 1/12/19; amended 5/13/19; 5/10/38; 6/9/64; 12/14/65

For preventing the pollution and securing the sanitary protection of certain waters used as sources of public water supply

Adopted 10/11/60

Cross connections between public water supplies and fire and industrial water supplies

Adopted 2/9/37; amended 5/12/42; 10/9/51

To prevent pollution or contamination of any or all of the lakes, ponds, streams, tidal waters and flats within the Commonwealth or of the tributaries of such tidal waters and flats

Adopted 8/14/45; amended 10/14/45

Supervision of plumbing

Adopted 6/11/35; amended 8/6/40; 1/10/50; 5/8/56

Operation of plants for the purification of shellfish

Adopted 6/5/28; amended 10/7/41

Enrichment of flour, white bread and rolls

Adopted 11/3/48

Establishing grades of milk

Adopted 5/8/35; amended 11/17/48; 6/12/56

Egg nog

Adopted 6/12/56

Flavored milk

Adopted 6/12/56

Fortified nonfat milk, half and half, standardized milk

Adopted 7/10/56

Cottage cheese

Adopted 7/10/56

Mayonnaise, mayonnaise dressing, mayonnaise salad dressing, salad dressing, french dressing

Adopted 7/10/56

Fruit butter, fruit jelly, preserves and jams

Adopted 7/10/56

Sale of rabbits intended for food purposes

Adopted 5/14/29

Manufacture and labelling of articles of bedding and upholstered furniture

Adopted 11/12/35

Cold storage

Adopted 10/10/33

Dental clinic license

Adopted 8/10/43; amended 6/9/64

Police station houses, lock-ups, houses of detention, jails, houses of correction, prisons and reformatories

Adopted 1910; amended 4/8/30; 6/15/48

Standards for tuberculosis hospitals and sanatoria

Adopted 6/14/27; amended 6/5/28; 8/12/32; 1/17/33; 5/10/38; 10/21/48

Subsidy for the hospitalization of the tuberculous
Adopted 5/11/20; amended 6/5/28; 2/14/33; 3/13/34

Minimum requirements for tuberculosis dispensaries are defined by Department of Public Health
Adopted 4/6/15; amended 7/11/16; 11/7/19; 7/14/25; 4/11/33

Active tuberculosis and methods of determining it in certifications made by boards of health and physicians
Adopted 12/11/56

Responsibility of superintendent or director of a tuberculosis hospital
Adopted 5/14/57

Hospitalization of patients with chronic rheumatism
Adopted 5/8/45

Reporting and control of venereal diseases
Adopted 12/18/17; amended 5/12/18; 6/11/18; 3/11/19; 11/12/23; 10/1/25; 10/8/29; 1/14/30; 1/14/36; 8/9/38; 4/11/44; 11/3/48

Treatment of persons suffering from venereal diseases who are unable to pay for private medical care

Adopted 2/14/33; amended 8/10/37; 8/9/38; 9/12/39; 11/6/40; 4/13/48; 11/3/48

Issuance of premarital medical certificates
Adopted 4/11/50

Physical examination of school children
Adopted 3/11/52; amended 8/25/53; 3/9/54; 2/14/56

Plastic bags and plastic film
Adopted 4/12/60

Disposal of containers of poisonous substances
Adopted 4/12/60

Administration and dispensing of harmful drugs
Adopted 2/14/61

Standards of identity and purity for Chlortetracycline to be used in the manufacture of Chlortetracycline Ice
Approved 11/10/59 and 12/8/59

Labelling of receptacles containing Benzol (Benzene), Carbon Tetrachloride and other harmful substances (approved jointly with Department of Labor and Industries)
Adopted 6/12/56

Sanitary Code, Article I, "General Application and Administration"
Adopted 9/15/60

Sanitary Code, Article II, "Minimum Standards of Fitness for Human Habitation"
Adopted 9/15/60; revised 12/12/61

Sanitary Code, Article III, "Housing and Sanitation Standards for Farm Labor Camps"

Adopted 10/11/60

Sanitary Code, Article IV, "Sanitation Standards for Recreational Camps for Children"

Adopted 11/7/61; amended 5/14/63

Sanitary Code, Article XI, "Minimum Requirements for the Disposal of Sanitary Sewage"

Adopted 1/9/62; revised 5/15/62

To prevent pollution or undue contamination of the atmosphere within the Metropolitan Air Pollution Control District

Adopted 7/11/61

To control the radiation hazards of radioactive materials and of machines which emit ionizing radiation

Adopted 2/13/62

Bedding, upholstered furniture and related products

Adopted 5/15/62; amended 9/12/63

Regulations relative to storage and distribution of frozen foods

Promulgated by Director of Food and Drugs, effective 8/1/60; amended 11/10/64

Regulations promulgated by Director of Marine Fisheries

Approved for sanitary requirements 4/13/42; 12/10/57

Regulations promulgated by the Director of Marine Fisheries relative to permits and certificates issued for the sanitary control of the shellfish industry, and relative to the sanitary condition of scallop operations

Approved 7/11/61; 9/19/61

Standards of admission, treatment, transfer and discharge of tuberculosis patients

Adopted 2/12/63

Hospital or sanatorium treatment standards for tuberculosis

Adopted 2/12/63

Sanitary Code, Article VIII, "Minimum Standards for Developed Family Type Camp Grounds"

Adopted 5/14/63

Regulations relative to devices

Adopted 4/9/63

Regulations for day care services for children

Adopted 12/10/63

Regulations relative to the identity, manufacture and sale of frozen dietary dairy desserts

Adopted 1/14/64

Sanitary Code, Article VI, "Minimum Standards for Swimming Pools"

Adopted 4/14/64

Sanitary Code, Article X, "Minimum Sanitation Standards for Food Service Establishments"

Adopted 1/1/65

Regulations relative to fish and fish products

Adopted 4/12/66

Standard of identity for baked beans

Adopted 11/9/65

Regulations governing transparent and semi-transparent wrappers and coverings

Adopted 11/9/65

Legislation

The following legislation of particular interest to public health was passed by the 1965 Legislature and enacted into law:

Acts of 1965 (July 1, 1965 - January 4, 1966)

- 580 - An act relative to the establishment of educational requirements and the use of civil service lists in certain cases.
- 582 - An act authorizing the Commonwealth, the political subdivisions thereof, and water companies to acquire or sell emergency sources of water supply throughout the year nineteen hundred and sixty-five.
- 602 - An act authorizing the Town of Braintree to acquire land in the Town of Randolph for water supply protection.
- 607 - An act extending the time within which an act making certain appropriations for the fiscal year nineteen hundred and sixty-six prior to final action on the general appropriation bill for said year shall be operative.
- 610 - An act authorizing the Office of School Lunch Programs in the Department of Education to establish standards and qualifications for certain food service personnel in public schools and to establish training programs for such personnel.
- 618 - An act relative to the licensing of certain homes providing day care to children.
- 632 - An act governing the procedure for registering dairy farms for the sale of milk within the Commonwealth.
- 634 - An act relative to the payment of benefits under the Employment Security Law to women who are unemployed due to pregnancy.
- 635 - An act providing for the licensing by the Gas Fitting Regulatory Board of limited undiluted petroleum gas installers.
- 642 - An act providing that, for a temporary period, certain payments under the Workmen's Compensation Act in cases of death be credited to and used for the purposes of the general second-injury fund.
- 644 - An act establishing fifty-eight dollars as the maximum weekly benefit for incapacity under the Workmen's Compensation Act.
- 646 - An act making certain appropriations for the fiscal year nineteen hundred and sixty-six prior to final action on the general appropriation bill for said year.
- 648 - An act establishing the Rutland Heights Hospital for the care and treatment of patients suffering from chronic and other diseases.
- 655 - An act providing for continuity of office in case of the absence, disability, resignation or death of a commissioner or head of a department.

- 656 - An act creating in the City of Boston a new Department of Health and Hospitals under the charge of a Board, incorporating said board for certain purposes, establishing new divisions in the office of the City Clerk and the Housing Inspection Department of said city, and transferring to said new department and divisions the functions of, and abolishing, the Health and Hospital Departments of said city.
- 661 - An act authorizing the introduction of reproductions of certain documents in evidence in any judicial or administrative proceeding.
- 672 - An act authorizing the City of Fall River to borrow money outside its debt limit for the purpose of constructing a public works operational center and an incinerator.
- 674 - An act further extending the time within which certain sewerage projects and works in the Metropolitan Sewerage District may be undertaken and completed.
- 676 - An act regulating the identity and quantity of commodities other than food which are packaged for sale at retail.
- 689 - An act redefining the word "Ambulance" under the Motor Vehicle Law.
- 691 - An act making certain appropriations for the fiscal year nineteen hundred and sixty-six prior to final action on the general appropriation bill for said year.
- 695 - An act relative to the liability for the charges for caring for certain infants born to unwed mothers.
- 697 - An act relative to the fees for certain permits and certificates issued by the Division of Marine Fisheries.
- 706 - An act authorizing the City of Quincy to enter into a contract for the construction and operation of a facility for the disposal of garbage or refuse by incineration, composting or any other sanitary means.
- 710 - An act providing that the Board of Rate Setting establish the rates to be charged by counties in convalescent or nursing homes, or rest homes.
- 717 - An act further extending the time within which an act making certain appropriations for the fiscal year nineteen hundred and sixty-six prior to final action on the general appropriation bill for said year shall be operative.
- 734 - An act establishing the West Northfield Water District in the Town of Northfield.
- 737 - An act relative to the powers of the Executive Committee of the Metropolitan Area Planning Council.
- 745 - An act extending the time within which an act making certain appropriations for the fiscal year nineteen hundred and sixty-six prior to final action on the general appropriation bill for said year shall be operative.

- 746 - An act authorizing the establishment of the Baldwinville-Otter River Sewer District within the limits of the Town of Templeton.
- 748 - An act authorizing the formation of regional refuse disposal districts.
- 750 - An act providing for the sale of objects made by patients in certain state hospitals.
- 759 - An act establishing a board of trustees of the Hillside Manor in the Town of Methuen.
- 767 - An act providing for the temporary maintenance of the Rutland Hospital property.
- 774 - An act further extending the time within which an act making certain appropriations for the fiscal year nineteen hundred and sixty-six prior to final action on the general appropriation bill for said year shall be operative.
- 775 - An act excepting certain transfers from the law relative to the establishment of educational requirements and the use of civil service lists in certain cases.
- 788 - An act providing for a special outlay for shore protection and improvement of rivers and harbors.
- 791 - An act to provide for a capital outlay program for the Commonwealth.
- 820 - An act authorizing the Town of Stoughton to contract for the disposal of its garbage, refuse and offal by composting for periods not exceeding twenty years.
- 822 - An act providing for the protection and maintenance of the Essex County Hospital during a certain period of time.
- 824 - An act making appropriations for the fiscal year nineteen hundred and sixty-six for the maintenance of the Departments, Boards, Commissions, Institutions and certain activities of the Commonwealth, for interest, sinking fund and serial bond requirements, and for certain permanent improvements.
- 827 - An act providing that medical assistance to the aged be given to certain recipients of public assistance.
- 840 - An act to provide a contributory group hospital, surgical, medical and other health insurance program to be known as optional Medicare extension to active and retired employees of the Commonwealth and of certain political subdivisions as a supplement to the Federal Health Insurance for the Aged Act.
- 841 - An act to provide a contributory group hospital, surgical, medical and other health insurance program to be known as optional Medicare extension to active and retired employees of certain counties, cities, towns and districts as a supplement to the Federal Health Insurance for the Aged Act.

- 846 - An act to provide for a special capital outlay program for the Commonwealth.
- 847 - An act to provide funds for the planning and development of the University of Massachusetts Medical School in the City of Worcester.
- 853 - An act providing for the prompt disposition of grievances of State employees relative to assignments of tours of duty.
- 872 - An act authorizing the City of Gloucester to obtain an additional source of water supply by diverting water from the Ipswich River.
- 874 - An act authorizing the Departments of Public Welfare and Public Health to enter into certain agreements for the purpose of enabling the Commonwealth to comply with, and be eligible for, certain assistance and funds under the Social Security Act.
- 877 - An act further providing for activities at the University of Massachusetts.
- 888 - An act providing that violations of standards of fitness for human habitation shall constitute a defense in actions of summary process to recover possession of rented or leased premises.
- 889 - An act providing for the development and promotion of nutrition education programs in the schools of the Commonwealth.
- 890 - An act further increasing the amount of indemnification payable by the Commonwealth for the protection of State employees in certain actions arising out of the operation of State-owned vehicles.
- 898 - An act relative to the enforcement of the minimum standards of fitness for human habitation existing under the State Sanitary Code.
- 901 - An act providing for the transfer by the Commissioner of Mental Health of certain property in the City of Worcester to the Board of Trustees of the University of Massachusetts for the University of Massachusetts Medical School.

Resolves of 1965 (July 1, 1965 - January 4, 1966)

- 80 - Resolve providing for an investigation and study by a special commission relative to certain civil service and public personnel administration matters.
- 81 - Resolve providing for an investigation and study by the Retirement Law Commission relative to providing for an increased allowance for earnings of a person pensioned or retired for disability.
- 86 - Resolve providing for an investigation and study by the Retirement Law Commission relative to pensions payable to certain retired persons and other related matters.

- 90 - Resolve providing for an investigation and study by the Department of Public Health relative to certain matters pertaining to nursing and convalescent homes.
- 91 - Resolve providing for an investigation and study by a special commission relative to the assessment of the costs of Bristol County Hospital and Nursing Home for the Aging.
- 93 - Resolve increasing the scope of the special commission established to make an investigation and study relative to retarded children and the training facilities available therefor.
- 99 - Resolve further reviving and continuing the special commission established to make an investigation and study relative to the advisability and feasibility of using all or a part of the land and waters under the control of the Metropolitan District Commission at Quabbin Reservoir for recreational purposes.
- 107 - Resolve increasing the membership of the special commission established to make an investigation and study relative to the establishment of a state board of examiners of bioanalytical laboratories.
- 109 - Resolve providing for an investigation and study by the Retirement Law Commission as to whether coverage is provided under the Accidental Death and Accidental Disability Provisions of the Retirement Law for employees engaged in the performance of their duties while on overtime.
- 116 - Resolve providing for an investigation and study by the Water Resources Commission relative to water resources in the Towns of Braintree and Randolph, and the surrounding area.
- 118 - Resolve providing for an investigation and study by the Department of Public Health relative to the pollution of Ell Pond in the City of Melrose.
- 122 - Resolve continuing the investigation and study by the Water Resources Commission of the public water supply resources of the Ipswich River.
- 127 - Resolve increasing the scope of the special commission established to make an investigation and study relative to the assessment of the costs of Bristol County Hospital and Nursing Home for the Aging.
- 128 - Resolve extending the time within which the special commission established to make an investigation and study of the status of women in employment and other areas shall complete its investigation and study and file its final report, and authorizing said commission to file reports from time to time.

Acts of 1966 (January 5 - June 30, 1966)

- 1 - An act in addition to the general appropriation act making appropriations to supplement certain items contained therein, and for certain new activities and projects.

- 14 - An act imposing a temporary tax on retail sales, and a temporary excise upon the storage, use or other consumption, of certain tangible personal property, revising and imposing certain other taxes and excises, establishing the local aid fund, and providing for the distribution of funds therefrom to cities and towns.
- 18 - An act limiting the number of refusals of employment from eligible civil service lists after three separate certifications.
- 35 - An act authorizing the Town of Concord to acquire land in the Town of Lincoln for reservoir purposes and curtailing the rights of the Town of Concord to draw from the waters of Sandy Pond for municipal water supply purposes.
- 36 - An act increasing the amount of money which the City of Cambridge may borrow for the purpose of constructing an addition to the Cambridge City Hospital and for reconstructing or remodeling the existing hospital facilities.
- 50 - An act authorizing the Town of Marblehead to remove certain structures and the remains of bodies from any abandoned or neglected cemetery in said town, and to acquire the land thereat.
- 52 - An act relative to the use of tuberculin on cattle at quarantine stations.
- 53 - An act authorizing agents of the Director of Livestock Disease Control to tag bovine animals with identification tags.
- 54 - An act making a corrective change in the definition of contagious disease in the Livestock Disease Control law.
- 55 - An act making a corrective change in the law relative to transporting cattle.
- 60 - An act authorizing cities and towns to borrow money outside the debt limit for remodeling, reconstructing, or making extraordinary repairs to reservoirs and filter beds.
- 65 - An act regulating the use of the word 'native' in connection with the sale or packaging of turkeys.
- 67 - An act making the chairman of the Youth Service Board a member of the Drug Addiction Rehabilitation Board.
- 70 - An act clarifying the time in which certain appointments or promotions may be made under the Civil Service Law.
- 71 - An act designating certain drugs as narcotic drugs under the narcotic drugs law.
- 77 - An act requiring a recorded roll call vote on any action by a state board or commission or by the governing board or body of any public authority at the request of any member.

- 78 - An act creating a lien in favor of a city or town for the expense of cleaning certain dwellings which are in violation of the Public Health Laws or Regulations.
- 79 - An act authorizing cities and towns to appropriate money for the erection and maintenance of public medical institutions.
- 91 - An act relative to the transportation of bovine animals.
- 94 - An act authorizing the Director of Livestock Disease Control to waive compliance of certain provisions of law relative to brucellosis or Bang's Disease in bovine animals.
- 100 - An act extending the time within which certain appeals may be heard by less than a majority of the members of the Civil Service Commission.
- 102 - An act relative to the monthly meetings of the Board of State Examiners of Plumbers.
- 115 - An act extending the time for filing requests for reviews of markings and the time for filing appeals therefrom in connection with civil service examinations.
- 122 - An act prohibiting minors from having alcoholic beverages in a motor vehicle upon any way to which the public has a right of access.
- 128 - An act authorizing the issuance of temporary licenses for the handling of raw milk for inclusion in bulk tank trucks.
- 129 - An act providing that male and female employees in classified civil service in certain cities and towns shall receive equal pay for equal work.
- 131 - An act making appropriations for the fiscal year ending June thirtieth, nineteen hundred and sixty-six, to provide for supplementing certain existing appropriations and for certain new activities and projects.
- 132 - An act repealing a certain obsolete provision of law relative to the discharge of sewage in Boston Harbor.
- 160 - An act establishing an interagency council on mental retardation.
- 192 - An act providing for qualifying examinations in certain cases under the civil service law.
- 195 - An act making the law relative to the disposition of burnt, dilapidated or dangerous buildings in certain cities and towns applicable in all cities and towns.
- 202 - An act relative to the making of contracts by municipalities for the disposal of refuse by composting, sanitary land fill, or by any other sanitary manner.

- 208 - An act making appropriations for the fiscal year nineteen hundred and sixty-six to provide funds for the Department of Corporations and Taxation.
- 210 - An act relative to the salaries of certain officers and employees of the Commonwealth.
- 214 - An act making certain changes in the powers and duties of the Department of Public Welfare.
- 217 - An act defining "Farming" or "Agriculture" under the Public Health Laws.
- 224 - An act validating the establishment and certain proceedings of the Oxford-Rochdale Sewer District.
- 237 - An act providing that the Director of the Division of Fisheries and Game and the Chairman of the State Reclamation Board be advisory members of the Committee for Conservation of Soil, Water and Related Resources in the Division of Conservation Services in the Department of Natural Resources.
- 265 - An act authorizing registered physicians or pharmacists to furnish drugs or articles for the prevention of pregnancy or conception.
- 274 - An act relative to the computation of the retirement allowance for certain persons in the public service.
- 276 - An act extending the time within which a public hearing shall be held under the law relating to the protection of flood plains.
- 290 - An act relative to appointments to fill temporary vacancies.
- 299 - An act relative to the qualifications of applicants for registration and examination by the Board of Registration in Medicine.
- 308 - An act relative to the registration as voters of persons in hospitals, sanatoriums, rest homes or convalescent or nursing homes.
- 324 - An act further extending certain provisional appointments and temporary transfers for a limited period.
- 331 - An act requiring notice to cities and towns of the taking by eminent domain of the right to draw water in cases of emergency.
- 333 - An act exempting the office of Superintendent of the Hillside Manor of the town of Methuen from the Civil Service Law and placing the position of Supervisor of Nurses, Hillside Manor, under said law.
- 339 - An act prohibiting the purchase without a prescription of certain exempt narcotic drugs by minors.
- 349 - An act providing eligibility in competitive promotional examinations.

- 353 - An act establishing the Health and Welfare Commission.
- 361 - An act providing that the keeping of such records of race, color or national origin as the Massachusetts Commission against Discrimination may prescribe shall not be deemed unlawful under the fair employment practices law.
- 381 - An act authorizing cities and towns to contract for a supply of oxygen for periods not to exceed three years.
- 391 - An act making appropriations for the fiscal year ending June thirtieth, nineteen hundred and sixty-six, to provide for supplementing certain existing appropriations and for certain new activities and projects.
- 396 - An act authorizing the Town of Braintree to use a certain reservoir in the Town of Randolph for its water supply.
- 400 - An act providing for the enforcement and prosecution of certain violations of the law relative to seed potatoes.
- 403 - An act authorizing the sale of certain plastic caps used in connection with certain toys.
- 409 - An act establishing the Board of Registration of Chiropractors and defining its powers and duties.
- 411 - An act making appropriations for the fiscal year nineteen hundred and sixty-seven, for the maintenance of the departments, boards, commissions, institutions and certain activities of the Commonwealth, for interest, sinking fund and serial bond requirements, and for certain permanent improvements.

Resolves of 1966 (January 5 - June 30, 1966)

- 1 - Resolve reviving and continuing certain special commissions.
- 6 - Resolve providing for an investigation and study by the Commissioner of Administration relative to the assessment of an appropriate share of the administrative costs of the Commonwealth against that part of an agency's administrative funds which is not made available through general appropriation.
- 12 - Resolve providing for an investigation by the judicial council relative to exempting nurses from civil liability as a result of rendering certain emergency care.
- 17 - Resolve continuing the investigation and study by the Department of Public Health relative to the pollution of Ell Pond in the City of Melrose.

- 22 - Resolve providing for an investigation by the Judicial Council relative to authorizing police officers to arrest without a warrant violators of certain drug laws.
- 23 - Resolve providing for an investigation and study by a special commission relative to assisting cities and towns in the Metropolitan Parks District to plan and develop their natural resources and protect their watershed resources.
- 24 - Resolve providing for an investigation and study by a special commission relative to the minimum standards of fitness for human habitation adopted by the Department of Public Health and their effect on property owners.
- 25 - Resolve providing for an investigation and study by a special commission relative to leases of land or buildings or both entered into by public agencies with nonprofit institutions.
- 28 - Resolve providing for an investigation and study by a special commission relative to the improvement of the Chicopee River watershed.
- 39 - Resolve providing for an investigation and study by a special commission relative to harbor regulations in the Commonwealth.
- 41 - Resolve providing for an investigation and study by a special commission relative to landscaping and landscaping maintenance of public buildings.
- 46 - Resolve further reviving and continuing certain special commissions.
- 47 - Resolve further reviving and continuing and increasing the scope of the special commission established to make an investigation and study relative to retarded children and the training facilities available therefor.

RECOMMENDATIONS FOR 1967 LEGISLATION

Following is the legislation to be submitted to the next session of the General Court by the Department:

1. APPOINTMENT OF SUPERINTENDENTS, PHYSICIANS, AND OTHER EMPLOYEES.

This legislation is proposed in order to permit superintendents of hospitals of the State Department of Public Health to appoint certain employees without the necessity of the time consuming requirement that the Commissioner of Public Health hold hearings on removal, etc. of certain employees.

2. REIMBURSEMENT FOR HOSPITALIZATION AND OTHER CARE.

This legislation proposes a corrective change in the law. Under present law a hospital service corporation may reimburse the Lemuel Shattuck Hospital only for hospitalization, while other State hospitals (Soldiers' Homes, etc.) are eligible for reimbursement for hospitalization and OTHER CARE. The proposed legislation would make the law the same for both, without discrepancy.

3. AN ACT DEFINING "RESIDENT" AND "CHRONICALLY NON-RESIDENT PERSON".

The proposed legislation defines "resident" and "chronically non-resident person" as they pertain to individuals suffering from smallpox or other disease dangerous to the public health. This is necessary to determine financial responsibility for care and treatment.

Under present law there is a definition, by incorporation, of "chronically non-resident" person. There is a reference to section 80 of chapter 111 of the General Laws. However, since section 80 refers exclusively to patients suffering from tuberculosis, this reference is not adequate.

4. AN ACT AUTHORIZING THE ACQUISITION OF CERTAIN LAND BY THE DEPARTMENT OF PUBLIC HEALTH.

At a conference in the Governor's office in the summer of 1963, it was decided that the Federal request for 4.35 acres of the "Bussey" land in Forest Hills, on which to establish a Water Pollution Research Laboratory, could be safely granted provided that room for adequate parking space, possible future expansion, etc. was ensured through purchase of the vacant lot across the street from the "Bussey" land. The Governor recommended at that time that action be taken to secure the lot in question, so that there would be no possibility of a land shortage in the area, at the time when additional space was required.

The present plans for construction of a new State Laboratory building, and a Water Pollution Research Laboratory on the piece of land transferred to the Federal Government, together with the power plant and parking requirements for these buildings, will leave barely enough room when the buildings are completed, and there will be essentially no unused land

available for the additional parking needs which will develop when the Federal building is enlarged and the State building is fully occupied. Nor is there adequate space for an added State building or a major wing on the projected new building. The likelihood of a serious shortage of space developing in the foreseeable future is therefore a very real one.

The lot in question is on a hillside. It is at present vacant, but the owner has been actively filling it in and there is every indication that it will be available and used for construction, presumably of house lot, with a year or so. Therefore purchase of the land by the State should be accomplished at the earliest possible date in order to avoid having to pay a very much higher price for it later.

5. VACCINATION AND IMMUNIZATION OF SCHOOL CHILDREN.

The purpose of the proposed legislation is to require that all children entering school be immunized against smallpox, diphtheria, pertussis, tetanus, measles and poliomyelitis. Through voluntary methods approximately 98% of the children entering school have been immunized against smallpox. Between 90 and 95% of the school children have been immunized against the other five diseases. The group that has not been immunized is hard to reach through community programs and they represent a risk of spot outbreaks of these diseases.

Elimination and eradication of the above diseases is now possible. Compulsory immunization would represent no hardship to over 90% of the families of school children since the children have already been immunized. Exceptions to compulsory immunization would be made on medical grounds, e.g., atopic eczema for smallpox immunization, steroid therapy for measles vaccine, etc.

6. AMENDMENT OF CHAPTER 111, SECTIONS 51-56 AND SECTIONS 71-73.

Legislation to join licensing of hospitals and sanatoria under present clinic and dispensary laws.

BUREAU OF CHRONIC DISEASE CONTROL

Division of Adult Health

The main purpose of the Division of Adult Health is to devise, implement or support measures which aim at (a) preventing the onset of chronic disease or, failing this, (b) limiting disability resulting from such disease and bringing about as much rehabilitation of the disabled as is possible.

The main effort in cancer control during the year was in the early detection of cervical cancer. Subsidies to hospital cancer clinics are in the process of being discontinued. The role of the tumor diagnosis service is under review.

The State-wide program for the rapid identification of Group A beta hemolytic streptococci as a primary prevention of rheumatic fever was implemented.

A proposed training course curriculum for nurses' aides was prepared together with guidelines for the selection, training, supervision and utilization of nurses' aides. Assistance was given the New England Board of Higher Education with the planning of a five-year training project for registered nurses in nursing homes. A manual of rehabilitation nursing principles and procedures was started.

A meeting with social workers was convened in order to help clarify procedures relating to transfer of patients between mental health hospitals and nursing homes. Nutrition consultation service was extended to nursing home administrators and to dietary personnel working with or planning to be employed by nursing homes. An Institute on Diet and Atherosclerosis was held for dietitians and nutritionists from the New England states. New field training opportunities in community nutrition were developed for dietetic interns in training at Beth Israel Hospital.

Training courses for homemaker-home health aides were conducted. Guidelines for personal care for homemaker-home health aides were prepared, incorporated into the pre-service and in-service training of aides and interpreted to the staff of home health agencies providing supervision of homemaker-home health aides in the home. A training program for administrative personnel of Homemaker-Home Health Aide Services was conducted in cooperation with the Training Center for Comprehensive Care. A standard grant application for Homemaker-Home Health Aide Services projects was designed, and, as an outgrowth of this undertaking, a Manual for Homemaker-Home Health Aide Services is in the process of preparation.

In connection with the administration of the Health Insurance Program for the Aged (Medicare) the following tasks were accomplished: (a) survey of Home Health Services in the State; (b) organization of a Developmental Grants program for home health services; (c) formation of advisory committees in the fields of physical therapy, occupational

therapy, medical social work and nutrition; (d) survey of hospital-based home care programs to determine eligibility for participation in Medicare; (e) interpretation of the Program to community groups throughout the State; (f) preparation of agreement forms for Home Health Agencies in contracting for "other therapeutic services."

Several studies were undertaken by the staff in cooperation with community agencies or professional organizations, such as (a) collection and analysis of service record data from Homemaker-Home Health Agencies and from the nutrition service of the Nashoba Associated Boards of Health; (b) evaluation of a Dial-a-Dietitian Program and the use of talking records for teaching blind diabetics; (c) determination, through mailed questionnaires, of the interest and availability of physical therapists, medical social workers and dietitians for employment by home health agencies and nursing homes.

The Chronic Disease Grants Program to develop and support community health services for the chronically ill and aged continued to grow in scope and quality. The projects have yielded important findings, stimulated service innovations and new administrative patterns and helped to establish a state-wide network of services for the chronically ill and aging.

Federal and State appropriating bodies should be helped to recognize the need for adequate funds to provide expanded services for the chronically ill and aged and to devise sufficiently flexible mechanisms for the administration of these funds in order that they may be expanded as effectively as possible.

Every woman over twenty-five years should have a Pap smear for the early detection of cervical cancer. To this end, cancer education of the profession and the public should be supported and means explored for providing the necessary laboratory facilities where such do not exist. Means for reducing the incidence of carcinoma of other sites should be explored. The Division should cooperate with the Massachusetts Heart Association and other agencies in implementing the recommendations of the Second National Cardiovascular Conference. Other official and non-official agencies should receive cooperation in the creation of a Massachusetts Interagency Council on Smoking and Health. A state-wide diabetes detection program based on blood sugar examination rather than urine should be promoted. Activities in the field of arthritis control should be explored.

The Division should provide leadership in the development of home health services throughout the State in cooperation with existing community health agencies, councils, and other program planning groups, and should assist in coordinating the services of home health agencies, nursing homes, and hospitals to improve continuity in patient care. Work with community agencies could achieve regionalization of health services, increasing the quality and quantity of these services. Further development of working relationships with social welfare, mental health, and rehabilitation agencies could lead to joint planning and development of integrated community services.

Development and extension of the utilization of service record forms for various home health services would assure data being systematically collected to measure the utilization and effectiveness of these services. Mechanisms are needed for compiling data on community health and social resources, and utilizing the information to determine needs for services and for the area-wide planning of these services. Studies should be undertaken of all services to measure the impact of medical care upon health services, such as a study of the utilization of other therapeutic services provided by home health agencies and the evolving patterns of regional health services resulting from medical care legislation.

The Division should assist with the interpretation of the services of home health agencies to professional and lay groups, such as physicians, hospital administrators, medical social workers, nursing home administrators, and community groups, in order to further identify the role of these agencies in the network of medical care legislation. It should participate with appropriate professional organizations in the development of plans for the training of aides in the fields of social work, physical therapy, occupational therapy, nursing home management, etc., so as to augment the supply of auxiliary personnel needed to staff both institutional and home health services for the chronically ill and aged. A foster care program should be demonstrated as one alternative to institutional care for the chronically ill and aged.

Division of Alcoholism

According to Chapter 418, Acts of 1959, it is the responsibility of the Division of Alcoholism to (1) establish programs for the diagnosis, treatment and rehabilitation of alcoholics; (2) study the problem of alcoholism; (3) develop and promote preventive and educational programs relating thereto; and (4) coordinate the work of all departments and agencies dealing with the care and treatment of alcoholics or with the problems of alcoholism.

Education activities, directed at the prevention of alcoholism and the prevention of problems associated with excessive drinking, continued to receive heavy emphasis. Training programs on pastoral care of the alcoholic and on church programs for teen-agers were carried out. Working closely with TECAP (The Ecumenical Commission on Alcohol Programs), an interfaith statement on drinking, drunkenness and alcoholism was developed and released to newspapers with good results. The Commission is currently planning a Pastoral Training Institute on Alcoholism.

A major target group of education activities is the teen-age segment. The Division has conducted teen-age programs or is working on their development in Needham, Falmouth, Winchester, Swampscott, Westwood and Concord. In addition, the Division is providing training to teachers in order to enable them to independently carry out alcohol education programs in their schools. Teacher training programs have already been conducted at Boston University and at the State Colleges at Boston, Bridgewater and Salem.

In the area of coordination, the Division assisted the South

Shore Mental Health Center in developing a special program for alcoholics participating in the work-training program of the Quincy Welfare Department. The Division is also working with the Boston and Middlesex Sanatoria on treatment programs for the tuberculous alcoholic. A Committee on Legal Issues to advise and assist the Division was organized during the past year. This Committee has been concerned with drinking and driving, and is attempting to obtain passage of "implied consent" legislation. Other coordination activities were carried out with half-way houses, voluntary committees on alcoholism, and the Brockton VA and Lemuel Shattuck Hospitals.

In research, the Division has initiated two clinic studies, one at the Washingtonian Hospital, for the development of guidelines in the evaluation of out-patients, and one at the New England Hospital, seeking factors that may be associated with attitudes toward alcoholism of both in-patients and out-patients. Projects related to schools and colleges involve the development and administration of evaluation scales for measuring student attitudes toward drinking before and after the Division's educational programs. One such study, at Xaverian High School, Westwood, showed that the students were less favorable toward excessive drinking after the educational program than before, the aim of the demonstration project. The Division is also helping to support studies at Brandeis University, University of Massachusetts, and Massachusetts General Hospital.

In treatment, the Division and Boston University Medical School have begun operation of the South End Center for Alcoholics and Unattached Persons, which is a multi-discipline facility. Initially the Center was operating at the rate of approximately 60 new patients a month, but a rapid expansion has taken place and the Center is now processing 120 new patients a month. Many patients are following through on their initial contacts, and the case-load is rapidly building up. Experience has already made it clear that unattached and homeless alcoholics will respond to a medical-social welfare approach and that police-correctional handling is not essential.

The seventeen out-patient alcoholism clinics treated a case-load of 9000 patients in fiscal 1966. However, the Division was able to finance hospitalization for only 187 patients, a drop of 30 from the previous year. This reflects the continued serious problem of obtaining hospitalization for the acutely sick and indigent alcoholic.

Since primary prevention of alcoholism is a major emphasis of the Division, the progress with groups of clergy is significant, particularly because it is a step toward community support for educational programs in the school systems. Exploration by teachers and pupils of attitudes toward drinking, drunkenness and alcoholism needs to be encouraged because responsible decision-making by teen-agers will shape their future drinking or non-drinking practices. Because a consensus in the community regarding the use and misuse of alcohol can greatly aid the school administrators, the Division's efforts in community organization and planning for school programs will continue.

Coordination of efforts by the many agencies that deal with al-

coholism continues to be a major focus of the Division, aiming at continuity of care for the patient. A concentration of efforts, with particular attention to State mental hospitals and tuberculosis institutions, is required, along with assistance to half-way houses.

In research, gradual progress is being made in the development of evaluation procedures for out-patient clinics. The increased case-loads in the clinics indicate an increasing awareness that alcoholism is an illness, and efforts must be intensified toward earlier case-finding and treatment. Improved services in clinics and additional in-patient facilities are possible with the increased allocation of funds, but the need is great for more hospitalization resources.

The four-fold program of education, coordination, research, and treatment will continue for fiscal 1967. Additional funds have been budgeted for clinic services and for the establishment of three regional offices. These offices will be developed to serve effectively all agencies, public and private, in the development and coordination of programs of education and treatment. In addition, the Division is now in a position to purchase, to a limited extent, half-way house services. This year will be an exploratory period in this regard and if it works out well, State support for half-way house services will be expanded.

Division of Communicable Diseases

The Division operates two separate and distinct programs. The communicable disease program is essentially advisory and investigatory. The venereal disease program combines the features of a medical care program and epidemiologic responsibility.

Communicable Diseases. Division figures show that the most significant event of the year was the marked decline in cases of measles. An outbreak of influenza B began during the winter in southeastern Massachusetts and spread north and west. The epidemic ended in March and attacked primarily grade and high school students.

Rabies control measures have been intensified. A five-point program has been developed in cooperation with the Division of Livestock Disease Control of the Department of Agriculture and the Massachusetts Veterinary Association. Public clinics for the immunization of dogs against rabies have been held in many communities.

The Division has been cooperating with Children's Hospital and the Metropolitan Chapter of the Boston Red Cross in collecting blood from adult patients convalescing from chicken pox. The blood is processed by the Red Cross, which supplies hyperimmune gamma globulin-chicken pox through the Children's Medical Center. This product is being evaluated as a prophylactic agent against herpes zoster in children who have leukemia.

Amantidine hydrochloride was evaluated this winter at Nazareth. None of the children showed an intolerance to the drug and none of them

became ill with influenza although several members of the staff, not on the drug, developed influenza.

An outbreak of Asian influenza is expected in 1966-67, mild in character and extent. Rubella is expected to increase, but a satisfactory vaccine for general use will probably be available by 1969. A Rabies Control Week has been planned for Boston from October 17 to 22, 1966, a joint endeavor of the Division, the Boston Department of Health and Hospitals, the Massachusetts and New England Veterinary Associations, the Animal Rescue League, the Angell Memorial Animal Hospital, and the Massachusetts Medical Society.

Venereal Disease. The records clearly indicate that organized and commercialized prostitution is not a major factor in the venereal disease problem. The biggest source of venereal disease contacts is the pick-up, and the places of pickup are centered primarily around taverns, bars, and restaurants. The home, hotels, and automobiles, in that descending order of frequency, are the places of exposure.

The Division continues the follow-up of all selectees discovered to have a positive blood test for syphilis or other evidence of venereal disease. These patients may be examined by their private physician or at the nearest State cooperating venereal disease clinic. These reports are evaluated and sent to the Induction Board. Similarly, the Division receives reports from the military of men separated from the Armed Forces who need follow-up for these diseases. Based on its successful experience for the past nine years, the Division staff is responsible for the interviewing of military patients in Massachusetts for their contacts, in addition to investigation of all military contacts in the State.

Plans for extending reciprocity arrangements on the premarital examination law continue.

The training program includes lectures, and radio and television broadcasts.

As a consequence of the intensification of the Sero-Reactor and Private Physician Visitation programs, more new cases of early infectious syphilis are being found.

The Division was asked by the Venereal Disease Branch of the Public Health Service to participate in a national study to determine the incidence of penicillin reactions in venereal disease patients in the twenty-two cooperating clinics. The results are being tabulated and analyzed by the Public Health Service at the present time.

The Division received two Project Grants from the Public Health Service. One was for a study on the attitudes of private physicians toward the venereal diseases; this study was contracted out to the National Public Opinion Research Center at the University of Chicago and its results have been completed. The second project will enable the Division to evaluate current venereal disease educational movies for their

effectiveness among the teenage population.

In addition to the preventive and control activities, the Division is currently engaged in ten applied research studies.

Five articles have been accepted for publication and will appear in the future in medical journals.

Division of Dental Health

The objectives of this Division are the prevention and control of oral diseases and malformations and the control of hazards to health secondary to the need for dental treatment procedures.

The Division provides technical guidance to local health agency dental units. Treatment facilities for advanced dental problems are directed by the Division and the Division assumes a staff guidance relationship with the dental units of the Department's institutions. Technical guidance is provided to the dental profession on both an ad hoc and a continuing basis. In-service training is provided for local community dental personnel and the Division serves as one of the few qualified agencies in the country in providing a residency training unit for dentists in the speciality of dental public health. A State-wide inspection program of dental treatment facilities for compliance with the Department's Rules and Regulations is maintained. The Division's staff undertakes the responsibility for school health dental services in the smaller communities of the State in need of this type of assistance. Field study projects are undertaken for the evaluation of dental treatment procedures and local program operations. Educational experiences and exercises are devised particularly for the school-age child in matters of dental health.

Programs for the control of dental diseases and disabilities and associated activities have been expanded modestly in size and scope. Greater emphasis has been placed on education for dental health in both the professional and public aspects by increased support from Federal resources.

A residency training program for dentists in public health work has been activated. This program has been given accredited status by the Council on Dental Education. The dentists in residency training have effectively increased the professional strength of the Department and their guided experience promises future competencies of significance in this area. This is a continuing program. New dentists have been assigned for the coming year to continue this supplement to our professional manpower in the education, service and research programs of the Department.

The Dental Health program has been augmented further by the addition to the Dental staff of a Training Supervisor. This has produced an increase in production of health education supplies and exhibits. In-service training programs for local and State personnel have been made more active and sophisticated. An important integration of health and education disciplines has been effected by the continuing conference method. Curriculum outlines in Dental Health Education have been con-

structed for the State's schools preparing auxiliary personnel for work with the dental profession.

The trends in our society toward organization of health care programs by third-party-payment schemes will affect the practice of dentistry in Massachusetts very materially. This, and the relative decrease in dentist manpower available for service to the public have prompted initiation of studies of the administration of dental services. Long-range studies in this subject have, therefore, been started in planning for financing of dental care, calculating costs of services, design of dental operatory space and efficient use thereof and the general establishment of standards for quality and quantity control of dental services. This specific attention to administration procedures has produced design improvements that have been applied successfully this year in two of our larger city health department dental services. Objective measurements in administration of dental services and the use of computer technology to derive lessons in efficiency in dentistry should uncover effective savings in manpower and operating costs. Concurrently, we have joined with the other New England states in a study of the postgraduate and continuing educational needs of dentistry. This emphasis on continuing development of the effectiveness of available professional resources must be viewed against the background of our population increase, its increased ability to seek dental care and our rapidly progressing shortage of dentists. There seems to be general agreement that, as in this case, not only must skills be sharpened but, very probably, an increase in the number of dentists should be encouraged through all possible means.

Special treatment services for children with facial disfigurements have been increased during this year. Along with this ability to provide for more children, there has been added a research component, studying factors in growth and development of children. A training component has also been added to this program, to produce dentists to carry on the special skills that have been developed at these facilities for the management of the child handicapped with disfiguring facial structures of developmental or traumatic origin.

In the program for the control of radiation in dentistry, this year's work concluded the inspection and surveillance of all the dental x-ray installations in the State. This inspection program has taken three years to accomplish and now assures that all x-ray installations of this type meet the standards set by the Department in its regulations for control of ionizing radiation. Fundamental inquiries were begun on the accumulative radiation exposure of the public from this source. Toward the end of the year the Federal government offered substantial support for the collection of this type of data. This assures a continuing effort by the Department in the fundamentals of radiation control. Today, dental radiation exposures to the public are less than half of what they were only a few years ago. The application of technical improvements by public health action has made this possible with no loss in diagnostic usefulness to the dental profession. It is expected that continued public health emphasis will produce, in the near future, still more and significant reductions from this source of radiation despite its present com-

paratively low levels.

Field studies continue to produce evidence of a sharp reduction in dental caries in areas where sophisticated control measures such as fluoridation of public water supplies or dietary fluoride supplementation are practiced. The application of these procedures is not widespread, however, and this State remains low on the list of those who have put these techniques into vigorous use. Dental caries, therefore, generally remains prevalent. This taxes treatment resources, particularly the publically supported ones, very severely. Only one community this year put the fluoridation decision to its voters and they rejected the option quite substantially. We continue to have to face population dental needs on a conservation-of-function and treatment basis rather than on one of prevention of disease. To speed the day when preventive measures will make a bigger contribution to the control of dental caries, the General Court, in its current session, has approved the formation of a special commission to study the dental needs of children and make suggestions for their resolution.

Lemuel Shattuck Hospital

The Lemuel Shattuck Hospital is an institution for the active treatment of chronic disease and of acute illness as it occurs in the chronically ill patient.

More patients were admitted to the hospital than in any year since its opening. However, they had a shorter average duration of stay which resulted in a decrease in the total patient days. More visits were made to the Out-Patient Department than at any other time. At the close of the year there were over one hundred Medicare beneficiaries who were in-patients.

The Medical Service completed its reorganization into acute general and speciality units, resulting in an improvement in patient care and a reduction in hospital stay. A Chronic Dialysis Unit was begun with State and Federal financial support. Staffing, equipping and construction are under way and this unit now is moving toward operation.

A special effort has been made to improve the continuity of care of patients when they are discharged from the hospital. Many hours of professional time were taken up with planning better methods of preparing patients, their families, and their attendants for the transition from the hospital to home. These methods are repeatedly being evaluated by following up discharged patients.

The resources of the hospital have been heavily used by other divisions of the Department for conferences, hearings, teaching activities, and a variety of community health services.

During the year plans were initiated for closer cooperation with the Massachusetts Rehabilitation Commission, the Division of Alcoholism, and the New England Sinai Hospital. All of these are still in process of completion.

The Clinical Laboratories Service responsibility was divided in two. Separate Departments of Pathology and Laboratory Medicine were created. This represents a better organization and should result in better service to our clinical services.

The Neurological Service was notified that its residency approval was denied since one-year programs were no longer being approved. This will mean dependence on affiliated residents, reduction in the size of the Neurological Service and more careful screening of candidates for admission.

In the next few years the Medical Service will emphasize recruitment of more rotating residents from other hospitals, better first-year assistant residents and a broader base of clinical teachers.

The major project for the Surgical Service is a reactivation and reorganization of the Orthopedic Service with the help of the Massachusetts General Hospital.

Statistical Unit. The purposes of the Statistical Unit are: to provide statistical data processing services to the Bureau of Chronic Disease Control; to develop a population-based Tumor Registry; to transmit data on punch cards, relating to registration and follow-up of cancer cases, to the National Cancer Institute.

The Tumor Registry has been adapted to a new processing system which should improve the efficiency of indexing and follow-up. Statistical assistance was provided for nineteen studies by members of the Bureau staff.

The Tumor Registry will be further developed and the common sphere of interest of the Registry and the National Cancer Institute expanded. Selected socio-economic and medical information on patients discharged from the Lemuel Shattuck Hospital will be processed mechanically. An evaluation of needs and efficiency of organization of community health services will be undertaken.

Training Center for Comprehensive Care. The purposes of the Center are: to operate a regional training and information center; to develop short-term training programs for health personnel throughout New England; to evaluate training programs offered.

The Center developed, presented and evaluated five short-term training courses for health personnel. For the Lemuel Shattuck Hospital, a discharge planning program and form were developed, also a discharge follow-up form and analysis of results of its use. A pilot training program for one hundred Home Health Aides was developed and awarded, to be funded by the Office of Economic Opportunity and to serve four states.

Nine short-term training programs for health personnel will be developed and presented.

Post-Hospital Experience Study. The principal objective of this Federally funded research project is to obtain and examine data on selected aspects of post-hospital experience of Greater Boston patients discharged from in-patient care at the Lemuel Shattuck Hospital.

The data have been processed and analyzed and preliminary findings summarized for use in introducing new practices in the hospital. The final analysis results in a fairly detailed profile of a large group of consumers of specialized rehabilitative care in a publicly owned chronic disease institution and a gross typology of the main non-clinical events in the post-discharge fates of this population. In the time remaining to the termination of the project, the analysis will be completed.

Division of Nursing Homes and Related Facilities

On March 8, 1966 the Public Health Council voted to create a Division of Nursing Homes and Related Facilities to take over the nursing home programs previously the responsibility of the Division of Adult Health. Along with its regular staff, the Division has authorization to secure the services of an architect on a consulting basis and of a physician whose position is funded through the Public Health Service. Its primary purposes are the functions of licensing and regulation.

The Division assists nursing homes and rest homes toward the development and maintenance of adequate standards of patient and residential care and promotes optimal conditions where possible. In order to gain superior levels of care, a substantial degree of activity is devoted to professional consultative services. Thus far inspections and surveillance have absorbed the predominant proportion of Division resources.

All nursing homes in the Commonwealth were classified. Sample record forms were distributed to nursing homes and rest homes. A draft of "Rules and Regulations for the Licensing of Convalescent or Nursing Homes" was compiled. Construction plans were approved for approximately forty nursing homes. An in-service training program for Division personnel was inaugurated. An initial three-day Medicare Institute for nursing home owners and administrators was held. The preliminary phases of an area-wide planning project were completed. A Federal contract was funded to analyze relationships between the cost and quality of patient care in nursing homes.

BUREAU OF CONSUMER PRODUCTS PROTECTION

Division of Food and Drugs

The Division's responsibilities are in the areas of public health protection pertinent to food and drugs, cosmetics, devices, registration of pesticides, the licensing of cold storage warehouses, sterilization of bedding and upholstered furniture, out-of-state soft drink and frozen dessert plants, methyl alcohol manufacturers, narcotic drug manufacturers, licensing of vending machines, sellers of hypodermic needles and syringes and licensing of establishments using animals for experimental purposes.

Whatever progress has been made in the fish inspection program may be credited to the educational efforts of the Director and the Inspectors. Cooperation from the industry and labor unions has been satisfactory.

Conferences with the food processors and preservers and with retail grocers groups are helping to bring about the development of two sets of rules and regulations pertaining to these groups. The passage of such regulations will prove to be milestones in the joint effort of the industries and the Department to provide for clean, wholesome food supplies for the consumers of the Commonwealth.

Milk inspection continues to be an area in need of reorganization, so that manpower and facilities available to local boards of health, the State Health Department and the Department of Agriculture can be coordinated effectively in accordance with modern concepts of inspection.

The Pesticide Board continued its coordination and licensing of pesticide applications. Its work has been outstanding in bringing about a control of the use of pesticides in the environment.

Enforcement of the frozen food code continues to show a steady improvement in the development of these products. The passage of the eating and drinking establishments rules and regulations by the Department has brought a better understanding between industry, local boards of health and the Division's inspectors.

Rules and regulations were promulgated and adopted by the Department concerning the identity of baked beans, food fish and fruit juices and orange juice drink.

The Division continued its educational work in lecturing to civic groups, such as the Kiwanians, Rotarians, P.T.A.'s, on drug abuse and drug-addict rehabilitation. The Division believes that the educational process is in the long run more effective in the prevention of drug abuse than a police-type enforcement program, and will attempt to carry out this type of program during the next year.

Inspection of vending machines dispensing foods has revealed un-

sanitary conditions, primarily due to obsolete and improperly maintained equipment. Fees of approximately \$17,000. have been collected from the vending machine operators licensing.

The greatest source of income from licensing fees continues to be from the bedding and upholstered furniture and stuffed toys law, which has brought in approximately \$60,000. during the last fiscal year.

Laboratory analysis shows almost a doubling of the number of samples of narcotics and harmful drugs submitted to our laboratories from various sources.

Labeling of hazardous chemicals continues to be a sporadic problem, but with the joint efforts of Federal Food and Drug Administration and our Division, labeling in compliance with the present laws has reached a satisfactory level, so that the consumers who can read can take the necessary precautions to protect themselves. Intensified educational programs using available news media are highly desirable in order to bring the matter of extreme caution in the use of these materials to the attention of parents and other adult consumers.

Milk contaminated with penicillin continues to be a problem in spite of the educational and enforcement program of this Department, the Department of Agriculture, assisted by the Experiment Station.

Bacteriological control and modified inspection techniques are necessary in the regulation of the frozen and precooked food industry. Many precooked foods are being purchased by the consumer in a nonfrozen condition for immediate consumption, requiring an alert public health regulatory effort.

The Division continues its survey of the milk and food supply for radiological contamination. Research and methodology continue at the Amherst laboratory.

A study of precooked frozen foods made possible by newly acquired microbiological facilities at Amherst was started about ten years ago. Microbiological examination of hundreds of samples disclosed the need for improvement in the wholesomeness of many items in this one category of potentially hazardous foods. This work, plus cooperative endeavors by many segments of the frozen food industry, was instrumental in the development of our present Massachusetts Frozen Food Code. Microbiological standards for precooked foods have proven to be especially practical and acceptable in the application of this code as it relates to all operations of the frozen food industry.

Conditions relative to precooked frozen foods which require promulgation of regulations for those items will be equally desirable for many of the other potentially hazardous foods. Most of these other categories have been subjected to microbiological examination by this Division. Evaluation of these results involving types and numbers of micro-organisms in many of these variety of foods must be based on an understanding of the procedures and technology used in preparing the particular food item.

BUREAU OF ENVIRONMENTAL SANITATION

Division of Sanitary Engineering

The Division controls activities in water supply, radiological health, air pollution, community sanitation, and water pollution. It also supervises the Metropolitan Air Pollution Control District of Greater Boston, and operates the Lawrence Experiment Station.

Grants from the Federal government for air pollution control work and for air pollution control survey programs in the Metropolitan Boston area and Metropolitan Springfield area have resulted in a tremendous increase in field work carried on by the Air Pollution Control Section and have added to the analytical work done by the Lawrence Experiment Station. Routine examinations of water, air, and soil samples continue to determine radioactivity levels in the environment. Environmental surveillance for radioactivity included the use of film badges at 30 sites in the Metropolitan Boston Air Pollution Control District. A survey was continued of environmental aspects of Atomic Energy Commission licensed isotope users. Surveys of the quality of water in our larger streams have been carried on.

More and more time and effort are required each year to supervise programs for the control of aquatic vegetation. Surveys of many shellfish-growing areas were conducted.

Examination of refuse disposal areas under Section 150A of Chapter 111 of the General Laws, and hearings relative to the operation of these areas continue to be a major activity. An attempt to change the refuse disposal law to require that all dumps be operated as sanitary landfills was defeated in the Legislature. A survey was made of solid waste disposal procedures of 79 communities in the Metropolitan Boston area.

Activity of the Division in the field of food service sanitation by the sanitarians was reduced markedly during the year, and personnel was engaged in inspecting recreational camps, local sewage disposal works, refuse disposal areas, and other activities considered more essential.

Passage of Chapter 220 of the Acts of 1965 has resulted in many requests by the Department of Natural Resources for advice of the water supply section with respect to draining and filling of flood plains.

The continued drought has resulted in additional work, primarily due to water shortages in many communities in the Commonwealth. The availability of Federal funds for planning water supply expansion has accelerated this phase.

There is every reason to believe that Federal grants to construct sewage disposal plants will increase markedly during the coming year and will be supplemented by State-aid grants to communities.

Eutrophication of our recreational waters is requiring expansion

of programs for the control of aquatic vegetation.

An application has been made for a Federal grant for a three-year project to plan for solid waste disposal. Receipt of this grant is contingent upon appropriation of approximately \$26,000. by the Commonwealth to be matched dollar for dollar by the Federal Government.

It appears quite certain that an air pollution control district will be formed under provisions of Section 142C of Chapter 111 of the General Laws in the Springfield area, and will be known as the Lower Pioneer Valley Air Pollution Control District.

Present problems which are certain to become more serious in the near future are pollution by aircraft, power plants, small incinerators, and motor vehicles. A special legislative commission to investigate jet aircraft pollution, including noise, has been established.

BUREAU OF HEALTH SERVICES

Division of Local Health Services

The primary objective of the Division is to provide an organizational structure for the promotion and distribution of activities and services of all units of the Department. In so doing, the Division works very closely with the local boards of health and local health departments.

The Governor designated the Department as the agency to implement Medicare, and much of the activity of the Division of Local Health Services was devoted to preparing for the effective date of July 1, 1966. The Division was given the additional responsibility, during this preparatory period and for some time thereafter, of coordinating the efforts of the several divisions and units of the Department until such time as a medical care coordinating unit could be established, staffed, and put into operation as part of the Commissioner's immediate staff.

Responsibilities involved survey and consultation activities with the providers of services who were to participate in the program. In regard to hospitals, the major effort was to help them establish utilization review committees and get these committees operating. Secondary efforts were placed on working with the non-accredited hospitals so that they might be in substantial compliance with the conditions for participation. The home health care agencies required almost full-time attention from November through June.

The Public Health Service provided a special formula grant which was used almost in its entirety for one-time grants to more than 50 home health care agencies to bring them in substantial compliance with the conditions of participation. At midnight on June 30, 81 home health care agencies had been certified, as well as 179 hospitals and 31 laboratories.

After reviewing the demonstration in the City of Cambridge, the decision was reached that it be brought to a close shortly after the end of fiscal year 1966. A final report is being prepared by Professor Freeman of Brandeis University which will analyze the results.

During the year the recommendations of the Hamlin study relative to the organization of the Boston Health Department and the Boston City Hospital began to be implemented, with appropriate legislation enacted by the Legislature and the Boston City Council.

Since its inception in 1963 the Vaccination Assistance Project was administered in the Division of Local Health Services. On several occasions in the past the Public Health Service has criticized this arrangement and suggested that the project belonged more logically with the Division of Communicable Diseases. Toward the end of the fiscal year arrangements were made between the two divisions, with the approval of the Public Health Service, and the administration of this project transferred.

The project involving health of migrant agricultural workers was extended for another year. Because it was anticipated that an increased percentage of the migrant workers would be coming from Puerto Rico, a more definite relationship was established with the Migrant Workers Project of the University of Puerto Rico Medical School for an interchange of information about the workers, with follow-up where indicated after they returned to their island. Some modifications in the existing project of the Commonwealth Service Corps were made and good working relationships between the two projects in Massachusetts established so that no duplication is likely.

Under Medicare, extended care facility benefits become available January 1, 1967. Work with providers of this service is planned for the first part of the year.

The Migrant Health project will concentrate on the workers in the cranberry bogs in southeastern Massachusetts.

District Health Offices

Central Health District

The purpose of the district health office is to encourage and assist local communities in achieving proper health services and to inform their citizens of the needs and trends of modern public health.

One of the most important functions continues to be the oversight and guidance of the Central Massachusetts Associated Boards of Health in order to indoctrinate new members with good public health practices through lectures, panel discussions, conferences, and general discussion of mutual problems.

Almost all day care centers are now licensed. The migrant labor project ran into some difficulty due to the voluntary aspects of the Tine Test or x-ray examinations. Several positive Tine Test patients left their jobs rather than submit to an x-ray, others left before the results could be read. The Tine Test is not practical for this group as it requires three visits and is thus a source of annoyance to the grower, who cannot spare his help at this busy time. An x-ray for all food harvesters should be mandatory by either mobile unit or bus transportation to an evening clinic.

The Nursing staff prepared Visiting Nurse Associations, boards of health and nurses for Medicare certification.

The physical therapists visited patients at home, treatment centers, schools, and the Orthopedic Treatment Room at Worcester City Hospital. In-service training programs were given to the Fitchburg Visiting Nurse Association, Nashoba Associated Boards of Health, and student nurses at Worcester Memorial Hospital. A Diabetes Fair was developed in Gardner. A successful all-day meeting on "Day Care - Why the Costs" was held in Fitchburg.

Northeastern District

The primary aim of the district office is to encourage and assist local communities in the achievement of adequate, efficient, modern health services; to serve people by providing a more thorough interpretation of the public health laws; and to inform interested groups of the needs and modern trends in public health.

An institute was conducted on "Nursing Responsibilities for Brain Injured Children." Current Views on Communicable Diseases, Hearing Loss in Children, Epilepsy, New Trends in Drugs and Treatments, Mental Health Implications in a Home Visit, Public Health Nursing Agencies and their Programs, were among the topics discussed at in-service educational programs for local public health nurses through the year. Workshops to interpret the nurses' responsibilities in the tuberculosis program were held and discussion sessions for several nurses new in school health programs were conducted.

One of the nutritionists programmed a series of monthly meetings with a visiting nurse association. An educational meeting on phenylketonuria was provided for the pediatric nurses of the Tewksbury Hospital; another for parents of PKU children on new foods they might use. A three-session in-service education program was organized and conducted in the towns of Andover, Manchester and Wilmington by the dental hygienist. Five students from three Boston schools of social work completed their field work experience in the district. Several in-service education sessions were held with the public health nurses in Haverhill and surrounding areas whose patients use the Haverhill Board of Health tuberculosis clinic service.

At the Lowell State Teachers College a session on "Nutrition Education Resources" was given and at the Salem State Teachers College, a session each semester on "Influence of Culture on Nutrition." Public health field experience was provided to two Boston University School of Nursing students working for their masters degrees.

Workers assigned to the district on the Vaccination Assistance Program held meetings with boards of health of those communities where preliminary surveys were conducted to interpret survey results and to discuss future immunization programming. The district was represented on the project committee of the Home Management Training for the Handicapped Homemaker. On the Migrant Labor Project all of the migrant labor farms were visited and an evaluation of the environmental sanitary aspects of the housing facilities was made to determine compliance with Article III of the Sanitary Code. Close liaison was maintained with local boards of health concerned and they were informed of major violations encountered. An immunization program against tetanus and poliomyelitis was made available to the labor force.

Two members of the staff participated in a development of a project request for a Homemaker-Home Health Aid Program for the Lowell Family Service Association. In an effort to upgrade public health nursing service in the community, and because of obvious duplication of

program areas, the director of the Lowell Health Department and the director of the Lowell Visiting Nurse Association requested a survey of both agencies. A survey report is not yet available. A "Guide for Estimating a Weekly Family Budget to Help Determine Nursing Fees" was updated and will be distributed to the local public health nursing agencies.

The engineering staff made investigations of local sewage disposal and public water supply. The licensing of day care services continued. The structure under which the district health office serves the Crippled Children's clinics was reassessed, and recommendations made relating to pre-admission evaluation, establishment of priority patient lists, smoother functioning clinic sessions, and more effective transmittal of information to other cooperating agencies. The district health officer and public health nursing advisors assisted local public health nursing services to meet certification requirements under Medicare.

Help was given to the Lowell Health Department to expand the tuberculosis clinic from a screening to a follow-up clinic. The need for the equivalent of full-time nursing service in tuberculosis follow-up was discussed with the Tewksbury Board of Health. Representatives of the staff have conferred with representatives of the Middlesex Tuberculosis and Health Association in relation to Tine testing in the public schools and the follow-up of contacts and reactors during the coming year.

Small group meetings with the nurses in Chelmsford, Somerville, and Belmont have resulted in the establishment of manuals for the school program. Three agencies who had never done cost analysis utilized the procedure outline in Ferguson's "How to Determine Nursing Expenditures in Small Health Agencies" and have established a cost per visit. It is hoped that the initiation of the survey of the public health nursing programs in Lowell will result in improved services to their community. A part-time fully qualified person now teaches nutrition and supervises ward experiences at the Tewksbury Hospital School of Practical Nursing. Dietary consultation in some nursing homes is eagerly sought and the guidance offered is enthusiastically followed. The J. B. Thomas Hospital in Peabody and the Addison-Gilbert Hospital in Gloucester now employ qualified dietitians.

The engineering staff plans to develop some short courses for personnel of local boards of health and for other interested parties relative to such subjects as subdivision control and changes to Article XI of the Sanitary Code. All Home Health Agencies will need a tremendous amount of additional consultation to follow through on most requirements for certification. Effort will be made to extend the institution of inter-agency referral and reporting systems to other hospitals and agencies involved.

Assistance will be given to the Emerson Hospital in establishing an effective public health nursing program; to the communities of Wilmington, Burlington and Billerica in their effort to purchase nursing service from other sources; and to strengthen the beginning interests of Tewksbury and Carlisle boards of health in providing adequate board of health nursing services.

Southeastern Health District

The district office serves three main purposes: 1) to carry out and coordinate certain direct service programs of the Department, 2) to assist in other programs of the Department providing service to local communities, and 3) to provide general assistance and consultation to local boards of health and other health agencies.

A new Crippled Children's Clinic was set up at the Lakeville Hospital. Patients come from the Attleboro, Taunton, Middleboro and Plymouth areas.

The implementation of the Medicare Program occupied most of the nursing advisors' time during the latter part of the year. All of the home health agencies were visited at least once to acquaint them with the conditions for certification.

On the day care licensing program, review and processing of applications, consultations, and service on the intra-departmental committee continued. Almost all of the centers which were given provisional licenses the first year of the program have now fully complied with the regulations and were recommended for regular licenses.

Health educators on the Vaccination Assistance Program have been actively working with local boards of health stimulating interest in immunization work.

The district office participated in the measles vaccine distribution and many boards of health held clinics in the spring. Polio vaccine distribution has also continued.

During the past year there has been a further increase in the amount of direct service provided to local communities, both in the amount of service given in the programs already in operation, and by the addition of the Medicare certification work. The central office has provided more of the intense type of consultation work. The Maternal and Child Health Division finished a survey of the maternal and child health services in Fall River for the City Health Department.

The nursing home inspection program was stepped up this year. The engineering staff has had increased requests for assistance in subsurface sewage disposal problems and installations. The sanitarians have assisted in the engineering work for the most part, and in the summer inspected recreational camps.

Western Regional Headquarters

The purpose of the Western Regional Headquarters is to encourage and assist communities singly or in union to develop health plans that will meet the needs that arise with changes in modern life, and to maintain the various public health services to the communities.

Nursing homes were classified, in addition to regular inspections for licensing and re-licensing. As part of the rheumatic fever project, a laboratory for the rapid identification of streptococcus isolated from throat cultures has been established in the Department of Microbiology of the University of Massachusetts. Stream pollution by domestic and industrial wastes continues as a problem for the sanitary engineers, as do solid waste disposal, subsurface sewage disposal, water supply, and air pollution in the Greater Springfield area.

Among the problems in food and drug control are the contamination of milk with penicillin, conditions relative to precooked frozen foods and salads and their bacterial contamination.

In preparation for Medicare, emphasis has been on the development of Home Health Services; nursing and the several therapies. All known regular day care services have been licensed. Pediatricians are now attached to all the clinics for crippled children. In April "A Day in Orthopedics" was held at the Wesson Memorial Hospital in Springfield. Another activity was a Cleft Palate Seminar for school speech therapists and school and other nurses held at the Speech and Hearing Center of the University.

A project was developed in Springfield for the high risk maternity case and her infant, also an infant immunization surveillance project with three hospitals in the area, physical therapy projects at the Monson State Hospital and the Belchertown State School and considerable work in schools in the field of dental health and in nutrition.

In addition to assistance given communities in the planning for home health services under Medicare, the staff has been called upon to help several communities in the planning of their own health programs: Northampton for the job description and qualifications of a health officer; Chicopee for the expansion of its program with Federal funds; Holyoke in the creation of a multipurpose center in a deprived area; and the Central Berkshire area in the development of a comprehensive health service based on a study conducted by the Massachusetts Committee for Children and Youth.

An Institute in the fall will be geared to re-training dietitians for work in nursing homes. It is planned to make studies in the epidemiology of certain diseases. There will be continued effort to improve the quality of bedside nursing service and preparation for the future requirement of public health nursing supervision, participation in the study and evaluation of different methods which local agencies have developed to provide their second service, development of mechanisms for the provision of nursing and therapeutic services to the 30 communities not now covered, and planning with local agencies and hospitals toward the future goal of making all rehabilitation services available to all citizens.

Work will continue with the Franklin County Public Hospital on the development of their Rehabilitation-Home Care Program, and on the preparation of a grant application for this.

Effort will be made to develop course work in early childhood education at the University of Massachusetts and the community colleges and to offer educational, nutritional and other consultation to local Head-start and other day care programs funded under the Office of Economic Opportunity.

There is need for formal studies in follow-up of low birth weight babies and follow-up of infants reported as having congenital deformities.

Civil Defense Section

The responsibility for the Medical Service of the Massachusetts Civil Defense Agency was formally assigned to the Department of Public Health of the Commonwealth of Massachusetts on January 3, 1955 by virtue of Executive Order No. 25. Within the Department, reassignment was made to the Bureau of Local Health Services in which a Section on Civil Defense was established.

The sharp increase in the number of trainees in the Medical Self-Help Program is noteworthy and it is altogether likely that the inertia regarding the program has been overcome and that the momentum gained may be of a sustained nature resulting in increased enrollment from year to year. As noted, this program fares best in the school systems, public and parochial. It is here that stress must be placed and every modality used to advance the course. This should not be done at the expense of the adult population but a weakness is found in this group which seems unyielding to any form of persuasion.

The formulation of a utilization plan between the Massachusetts Civil Defense Agency and the Massachusetts Hospital Association for the Packaged Disaster Hospital is a forward step in that established hospitals are asked to assume responsibility for the administration and staffing of the Packaged Disaster Hospital subject to the approval of specified civil defense persons.

All pre-1962 Packaged Disaster Hospitals stored under the Pre-positioning Program have been brought up to a 30-day operating capacity. Eighty hospitals are now in position, increasing hospital bed capacity by 16,000 or about 23% above present hospital beds in the State.

Nursing Section

The objectives of the Nursing Section are to promote the highest quality nursing service and to secure a more equitable distribution of public health nurses throughout the State, so that eventually such service will be available to every citizen of the Commonwealth.

With the additional functions provided by Medicare legislation, the Nursing Section now has, for the first time, an officially designated Assistant Director of Public Health Nursing Services; and in the districts a position of regional nursing advisor has been created to coordinate nursing services in the region as they affect the home health services.

A high percentage of nursing agencies are without qualified supervision to assist with program planning and evaluation of services. A statement of policy on nursing supervision has been formulated, approved by the Public Health Council, and distributed to each home health agency.

The Nursing Section in cooperation with the Training Center for Comprehensive Care at Lemuel Shattuck Hospital, developed a workshop for nursing supervisors from home health agencies who needed additional knowledge and skills because of the requirements set forth by the conditions of participation in Medicare. This program was made available to the other New England States.

In order to have accurate data on what was presently available for home health services, the Section participated in a survey of the State. On June 30, 1966, one hundred and forty-six home health agencies were recommended for certification out of a possible 217 agencies.

With the acquisition of Federal monies to assist home health agencies to meet the conditions of participation, the Nursing Section assisted agencies in the development of requests for grants and was represented on the review committee for the recommendation of agencies for these grants..

The Fall River Health Department requested a survey of its maternal and child health services, which was done. The agency has since made the following changes: equalized the prenatal clinic case-load in three local hospitals; increased payment to qualified physicians by a substantial amount; organized well-child conferences as a part of the ambulatory service of hospitals; improved reporting of services rendered by the voluntary nursing agency to the official agency.

A conference with "hospital teams" -- administrator, obstetrician, pediatrician, and nurses from maternity and new-born services, was held to discuss New Concepts in Maternity and New-Born Care. Thirty-one teams attended and future conferences have been requested.

The nursing services in the hospital services have worked on the implementation of recommendations made by survey groups from a special State management group, and from the Joint Commission on Accreditation of Hospitals and Division of Hospital Facilities on Health Insurance Program Conditions of Participation for Hospitals, and on an increase in the amount and kind of planned in-service education for nursing personnel.

Nurses will assist with the interpretation of new legislation on family planning and begin to plan for the inclusion in educational programs of the new concepts of family planning and the potential for nursing service.

Nursing consultation will be provided to home health agencies certified with correctable deficiencies and those which have not yet been certified. In areas where no nursing service exists, work will begin with representative groups to assist them in providing nursing service for their uncovered area.

Educational programs will continue for public health nurses and others in order to provide for increasing quality nursing care to individuals and families in their homes. At least two, three-day workshops for supervisors working in home health agencies will be provided. Nursing services between hospitals, extended care facilities and home health agencies will be further coordinated.

Nutrition Section

The objectives of the Nutrition Section are: to strengthen the effectiveness of the nutritionist as an integral part of the public health team so that she can function successfully in the wider field of health, education, and welfare; to stimulate in professional colleagues and the public an awareness of the importance of the preventive, as well as the therapeutic aspects of nutrition; to develop useful tools for evaluating services.

Maternal and Child Health. Having a full-time nutritionist on the staff has facilitated obtaining recognition of the importance of the nutrition component in Maternal and Infant, Children and Youth, and special projects, and has made it possible to define needs, locate resources and integrate nutrition into original planning.

Medicare. In order to provide dietary consultation for medical and extended care facilities, the Nutrition staff has cooperated with the Massachusetts Dietetic Association in making a survey to determine manpower resources and present and potential needs.

Low Income--Anti-Poverty. In cooperation with the Massachusetts Dietetic and the Massachusetts Home Economics Associations, the entire Nutrition staff participated in a three-day workshop on Working with Low-Income Families. This gave an excellent opportunity to acquaint home economics teachers and others with the services and materials which Department nutritionists can provide. A large display of available resources was assembled for the workshop and later exhibited at State meetings of several other professional groups. As a follow-up of this workshop, two new pamphlets -- "Getting Your Money's Worth in Food" and "Milk for Everyone" -- in simple language for people with low reading ability, were prepared by the Nutrition staff.

Head Start. The Nutrition staff assisted in the orientation courses for about five hundred Headstart teachers. They gave consultations on organization and operation of snack and noon feeding programs, food needs and meaning of foods, together with methods of encouraging the 4 to 6-year-old group to try unfamiliar foods. They also gave mothers of Headstart children help in food buying, meal planning, and food preparation to conserve nutritive value. The Chief Nutritionist assisted the Boston School Department in planning its project for six home economists to work with the mothers of Headstart children. Later these leaders were provided with nutrition teaching aids and materials.

The Massachusetts Consumers Council, an agency of the Governor's Office, requested help from the Nutrition Section several times during the year, following a State-wide meeting at which Mrs. Esther Peterson, of President Johnson's staff, urged better services for consumers. A nutritionist was provided for a meeting of twenty-five home economics teachers from communities in the Central District. An article on costs of food was written for the Quarterly Report of the Massachusetts Consumers Council.

New approaches to nutrition service included the development of talking records for blind diabetic patients, with a program for distribution and for testing the effectiveness of the method of teaching. The staff also cooperated in an on-going city-wide program for diabetic patients and families.

Because of the pioneering efforts of Massachusetts in the detection and treatment of phenylketonuria, the PKU staff nutritionist has accepted appointment as a member of the dietary protocol committee for the National PKU Study.

In addition to the usual participation in the training of undergraduate students and dietetic interns, the outstanding educational effort this year was the sponsoring of two, three-day institutes for New England dietitians and nutritionists. One, funded by Maternal and Child Health, was on Human Relations, in which the staff of the Boston University Human Relations Center cooperated. The other, on Atherosclerosis, Diet and Community Consultation was co-sponsored by the New England Chapters of the American Heart Association and the Public Health Service Center for Comprehensive Care, Boston.

At the request of the Children's Bureau a week of observation of the PKU program was set up for a Swedish dietitian.

In-service education has aimed at improving effectiveness in human relations, understanding the disadvantaged, and learning new methods of approach to various situations. Awareness of the importance of nutrition has been stimulated in professional colleagues in various ways. The Department institutions have been assisted in improving their food service along lines recommended by the Task Force. A job description for the position of Institution Food Service Specialist was prepared for Dr. McHugh. Preliminary discussions on strengthening nutrition services in the newly organized Boston Department of Health and Hospitals were held. Qualifications for recruiting personnel were set, and standards for dietary services in nursing homes developed.

A new leaflet, "The Public Health Nutritionist," which was prepared for a United Community Service Health-O-Rama, is being widely used to give the public, as well as professional workers, a broader understanding of the services of nutritionists. The greatly increased demand for nutrition leaflets and teaching materials shows a growing public awareness of the importance of nutrition.

Two evaluation tools have been developed for use with a computer and are being tested. They are report forms for activities of the Nashoba nutritionist and for dietary consultations in nursing homes.

Data from surveys of dietitians and nutritionists will be used in recruiting personnel to work in agencies providing services under Titles XVIII and XIX and Special Projects, and in providing refresher courses.

Department nutritionists will cooperate with the New England Dairy and Food Council in a Weight-Watch Program for health professions and will continue cooperation on in-service education for teachers on the introduction of the revised nutrition handbook and on working toward uniform, sound nutrition training for each of the health sub-professional groups.

More nutrition leaflets and teaching aids will be developed for use with disadvantaged families and in training of neighborhood workers.

A request has been made for a 12-month nutrition traineeship with emphasis on maternal and child nutrition, to be funded by Maternal and Child Health and open to nutritionists with public health graduate training but no public health experience.

Division of Maternal and Child Health Services

The Division is concerned with the quality and quantity of health services available for mothers and children and utilized by them.

Earnest efforts have been directed toward initiating maternity and infant care projects throughout the State. The Boston project is progressing rapidly. The first draft has already been completed and reviewed by the planning committee. Maternity and infant care project grant requests have been planned with Springfield and Cambridge. Haverhill, Lawrence, Brockton and Fall River health agencies have also shown interest in setting up their own programs.

The amendment to the law concerning payments for hospital care of certain premature infants became effective on December 19, 1965. Payment for the hospital care of infants born to unwed mothers who are residents of Massachusetts became the responsibility of the Department at that time. New policies and procedures were established within this Division to handle these cases.

Newer concepts in Maternity Care was the theme of a two-day conference held last fall, sponsored jointly by this Division, the Academy of Pediatrics, and a number of other agencies.

A Lead Poison Prevention Program has been established, and a preliminary investigation to ferret out cases of lead poisoning is being carried out.

The program of consultation with licensing personnel and day care owners has continued. Over thirty classes to fulfill licensing requirements have been organized.

School health program promotion continues. Two major areas were emphasized: the first was development of a comprehensive, year-long in-service training program for the entire staff of the South Hadley School

System, a demonstration which might be used as a prototype for offerings to other communities in the State. The second project was the organization and development of an Ad hoc Committee on Smoking and the Schools.

Reports compiled by the Statistical Unit were sent to Children's Bureau. Program evaluation and studies were conducted in relation to maternal deaths, fetal deaths, premature infant care, school health, rheumatic fever control activities and services for handicapped children.

Emphasis on the detection and care of sensory impairments has of late received attention on the national level, and to some degree Massachusetts programming reflects these new attitudes.

Services for crippled children during the year had the usual 10% increase in case load. A new orthopedic clinic was established at Lakeville Hospital. The PKU program was expanded to include other inborn errors of metabolism. Many of the families from the crippled children clinics, as well as those referred from other sources, received chromosome studies as well as genetic counselling.

Chapter 265 of the Acts of 1966 revised legislation pertaining to family planning, to become effective August 8, 1966. The Division will establish an advisory committee to participate in over-all planning of the program.

It is intended that in-service training involving community licensing personnel and day care owners be carried further so that not only day care owners but also the communities in which they work may understand the program.

In the year ahead we expect to bring together the resources and leadership within our Commonwealth for guidance to the schools in defining their role in family life education programs. Increasingly public school staff feel that they should assume some responsibility in this area. Their major questions presently revolve around what they should teach and at what grades.

BUREAU OF HOSPITAL FACILITIES

Division of Hospital Facilities

As required by legislation, the functions of the Division consist of the inspection and licensure of hospitals and sanatoria, college and school infirmaries, and clinics and dispensaries. Specific regulations apply to blood banks. In accordance with existing legislative requirements, the Division is also responsible for approval of corporation charters for hospitals and sanatoria, clinics and dispensaries.

The broad purpose of the inspection and licensing program is to provide adequate standards of care in all licensed facilities by educational and regulatory procedures. Registration and approval of such sources of ionizing radiation as x-ray facilities in the offices of general practitioners and x-ray specialists, as well as other diagnostic and therapeutic sources, are now required by legislation.

Other functions recently added to the Division include certification of hospitals and independent x-ray laboratories under the Medicare Program.

Certification of hospitals under the Medicare Program has been the most important new development in the program of the Bureau of Hospital Facilities. It was necessary first of all to provide the Social Security Administration with a complete inventory of all hospital facilities. This was followed by a program of survey and inspection, which necessitated a detailed analysis of facilities and personnel in all non-accredited hospitals. Hospitals accredited by the Joint Commission on Accreditation of Hospitals had to present evidence concerning the development of utilization review plans. To facilitate the program of certification, two certification clinics, one in Springfield and one in Boston, were conducted by the Bureau. There was practically one hundred per cent representation of general hospitals. By the end of the fiscal year, the bulk of the initial certification program had been completed.

Area-wide planning continues as an important activity of the Bureau. Rising costs of hospital care and shortages of key personnel emphasize the urgency of better hospital planning. This program was highlighted this fiscal year by the Governor's conference on hospital planning, throughout which there was great emphasis on the need for area-wide planning and its implementation. The Bureau continues to cooperate with the Massachusetts Hospital Association in coordinating hospital service areas and encouraging area-wide planning. With respect to hospital licensure, it has become evident that there is need for additional professional personnel in order to keep up with the many activities which are necessary in order to maintain quality medical care.

The control of cross-infection continues to be an important function. As last year, Salmonella and staphylococcal infections are the most frequently reported causes of cross-infection in hospitals. During the past

fiscal year at least four major Salmonella outbreaks were investigated.

With respect to the Division's formal educational program, in addition to the two certification clinics mentioned above, an institute on "Microbiology of the Hospital Environment" was conducted at the Carney Hospital. Two days were devoted to this meeting, which was attended by 561 persons.

The Bureau's program in radiological health protection, associated with medical users of ionizing radiation, becomes increasingly active. Primarily, emphasis is being continued toward surveys of diagnostic x-ray units, particularly those in the offices of practicing physicians. A survey through the mail, in cooperation with the Massachusetts Medical Society, brought to light many installations previously unknown to the Department. Added programs this year consist of registration of x-ray units in veterinary offices and in the offices of podiatrists.

Responsibility has also been assumed for certification of independent x-ray laboratories under the Medicare Program. This function, too, will grow in importance as the Medicare Program becomes stabilized and strengthened.

During the fiscal year 1965-66, the major new activity of the section on hospital survey and construction was the survey of all general hospitals under the new modernization program of the Hill-Harris law. The State Plan under this new law has been completed and approved by the Public Health Service. In Massachusetts, as in other states, difficulty is developing in connection with the new Federal formula developed to establish bed need under the Hill-Harris Program. It appears that many high priority areas will be permitted to add few, and in some cases no, new beds, in spite of exceedingly high occupancy rates. This paradoxical situation is a direct result of the new Federal formula developed in the latest amendment of the Hill-Harris Program. The same problem develops in connection with the addition of chronic disease beds, since it appears that many Massachusetts hospital service areas are over-bedded. New beds under this program can be added only if non-conforming proprietary nursing homes cease to operate. It is obviously impractical to expect proprietary facilities to cease their operation in order that they may be replaced by new facilities operated under voluntary auspices. In the Boston area it appears that only thirty new beds may be built in general hospitals under the Hill-Harris Program. No consideration is given in Boston to the large proportion of admissions (fifty per cent) that come to Boston hospitals from outside the Boston area and from outside of Massachusetts. These difficulties, it is hoped, will be corrected this coming fiscal year.

Utilization review programs have to be evaluated during the first year of the Medicare Program, and the Division must continue to supply consultation services to hospitals in order that they may retain their certification.

It is hoped that more time can be devoted to rules and regulations for the several hospital classifications included within the licensing program.

It is anticipated that a course on the control of cross-infections in hospitals will be given, in cooperation with the Communicable Disease Center, aimed primarily at physicians who are members of infectious control committees.

The development of a licensing program for chiropractors may mean a new source of facilities to be surveyed.

It is hoped that difficulties with the Federal formula for new-bed construction under the Hill-Harris Program will be corrected.

Material will be gathered from hospitals for a patient-flow study to provide statistical information for local area-wide planning groups, for the Hospital Survey and Construction Program and for the Division's use in its Medicare activity.

